City of Tampa
Community Redevelopment Agency
Community Advisory Committee Questionnaire
Ybor City Development Corporation, Inc.

Instructions:
- Completed questionnaires serve as requests for 1) Nomination for election to the Ybor City Development Corporation, Inc. Board of Directors and 2) Appointment to the Ybor City Community Advisory Committee by the Tampa Community Redevelopment Agency.
- Complete all portions of the questionnaire.
- Completed questionnaires will be on file in the office of the City Clerk for two years from date received.
- Please type or print legibly in black ink.
- **Completed questionnaire and acknowledgement form must be received at the Ybor City Development Corporation office, via fax or e-mail by 12 p.m. Monday, July 29, 2019. (Fax: 813-274-7935; Email: Courtney.Orr@tampagov.net)**

---

Applicant’s Full Name: ____________________________________________________________

Home Address: __________________________________________________________________

City: __________________ State: ____________ Zip Code _____________________________

Home Phone: (______) _________________ Alternate Phone: (______) ________________

Fax: (_____) ______________________

Email Address: __________________________________________________________________

Place of Employment: __________________________________________________________________

Job Title: __________________________________________________________________________

Business Address: ____________________________________________________________________

City: __________________ State: ____________ Zip Code: ________________________________

Business Phone: (______) _________________ Alternate Phone: (______) ________________

Fax: (_____) ______________________

Are you a resident of the City of Tampa?  Yes _____ No _____ If yes, how long? ___________
1. Have you ever been convicted of any felony or misdemeanor offense?  Yes _____  
   No _____ If Yes, please elaborate (omit minor traffic violations and offenses as a minor).

________________________________________________________________________________
________________________________________________________________________________

2. Are you currently serving in another position appointed by the Mayor, City Council or the Community Redevelopment Agency?  If so, please elaborate.

________________________________________________________________________________
________________________________________________________________________________

3. Are you, or have you been an active member of YCDC, Inc. or an advisory or executive group representing your CRA through the staff of the Urban Development department?  Please describe your role and length of service.

________________________________________________________________________________
________________________________________________________________________________

4. Please list your educational history by institution beginning with High School and include degrees attained.

<table>
<thead>
<tr>
<th>Name / Location</th>
<th>Dates Attended</th>
<th>Level/Degree Attained</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. Do you have relatives who currently work for the City of Tampa?  Yes _____ No _____  
   If so, please list by name, relationship and position held.

________________________________________________________________________________
________________________________________________________________________________
6. Check the category or categories that you feel you represent in Ybor City. Check At-large if none of the categories apply.

- [ ] Retail/Arts
- [ ] Bar
- [ ] Restaurant
- [ ] Professional Office
- [ ] Hotel/Bed & Breakfast
- [ ] Property Owner
- [ ] Multi-family Residential
- [ ] Entertainment/Events
- [ ] Finance/Banking
- [ ] At-large
- [ ] Ex-officio (Specify organization or affiliation):

7. For all representative areas checked in question #6, please describe your experience and other elements of your personal history that you believe should be considered relative to your appointment.

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

8. If you are appointed, do you know of any reason whatsoever why you will not be able to attend regular meetings, participate fully or otherwise fulfill your responsibilities as an Advisory Committee member? (YCDC Board meetings are generally the fourth Tuesday of the month from 4 to 6 p.m. Committee meetings are Tuesday or Thursday from 3:30 to 4:30 p.m. every other month).

Yes [ ] No [ ]

If so, please elaborate: ____________________________________________________________
9. List at least three persons as references who have known you well within the past five years, including a current address, phone number and the capacity in which they have known you. If you checked an area(s) of expertise above, two references should be able to provide reference as to that expertise.

Name: ______________________________________________________________________
Address: __________________________________________________________________
Phone Number: _____________________________
Capacity: ____________________________________________________________________

Name: ______________________________________________________________________
Address: _______________________________________________________
Phone Number: ____________________________________________________________
Capacity: ____________________________________________________________________

Name: ______________________________________________________________________
Address: __________________________________________________________________
Phone Number: _____________________________________________________________
Capacity: ____________________________________________________________________

Name: ______________________________________________________________________
Address: __________________________________________________________________
Phone Number: _____________________________________________________________
Capacity: _______________________________________

Name: ______________________________________________________________________
Address: __________________________________________________________________
Phone Number: ________________________________________________________
Capacity: ____________________________________________________________________
City of Tampa  
Community Redevelopment Agency  
Community Advisory Committee Questionnaire  
Ybor City Development Corporation, Inc.

10. List any business, professional, civic or fraternal organizations of which you are a member and the dates of your membership.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Dates of Membership</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

11. YBOR CITY SUPPLEMENTAL QUESTIONS (Please attach a separate sheet with responses):
   a. How does your personal, professional, and/or educational background connect with the redevelopment and development of Ybor City as a place to ‘live, work, and play.’
   b. In what ways have you supported Ybor City’s advancement in the past?
   c. How would you improve and enhance the image of Ybor City?
   d. What is it about Ybor City that attracts you to want to serve on this volunteer advisory board?
   e. On which committee(s) would you find your skills the most valuable and why?
      1. ____ Parking, Public Safety and Infrastructure
      2. ____ Economic Development and Planning
      3. ____ Culture, Arts and Special Events

I certify that the foregoing responses to the questionnaire are true and correct to the best of my knowledge.

____________________________________________      _____________________________
Signature                          Date

____________________________________________
Printed Name
Please complete the Community Advisory Committee Questionnaire and the Sunshine Law and Ethics Code Acknowledgement Form. If you have any questions, contact the YCDC office at 813-274-7936.

When completed, both forms must be received by the Ybor City Development Corporation Nominating Committee no later than 12 p.m. on Monday, July 29, 2019, via one of the following three options:

Hand delivery or mail to:

Nominating Committee
Ybor City Development Corporation
2015 E. 7th Ave
Tampa, FL 33605

Fax to:

YCDC Nominating Committee
(813) 274-7935

Email to:

Courtney.Orr@tampagov.net

Thank you for your interest in volunteering as a board member of the Ybor City Development Corporation.