

## LITTLE HAITI REVITALIZATION TRUST BOARD OF DIRECTORS APPLICATION

Name: Email/Pl	hone:
Home Address:	
Business/Employer: (Street/City/Zip Code)  Email/P	Phone:
Business Address:	
(Street/City/Zip Code)	
CITY CODE SECTION 12.5-44(C)(5) STATES THAT NO EMPLOY MUNICIPALITY OTHER THAN CITY EMPLOYEES SHALL SERVE HAITI TRUST.  ARE YOU AN EMPLOYEE OF MIAMI-DADE COUNTY OR ANY OTHER MISTIFYES, IS THE APPLICANT A FIRE FIGHTER OR LAW ENFORCMENT OF	ON OR BE APPOINTED TO THE LITTLE
Please provide the following information in the space provided and attach a résumé.	
EDUCATION:	
WORK EXPERIENCE:	
ORGANIZATIONS AND COMMUNITY ACTIVITIES:	
Signature	Date

SUBMIT ORIGINAL COMPLETED FORM(S) AND RÉSUMÉ TO: City Clerk's Office, Miami City Hall, 3500 Pan American Drive, Miami, Florida, 33133