

# Cleveland County Sheriff's Office



## Community Advisory Board Application

### Contact Information

Name:

Date of Birth:

Street Address:

City, State, Zip Code:

Cell Phone:

Work Phone:

Email Address:

Authorize Background Check: Yes or No

How long have you lived in Cleveland County?

**Please highlight any volunteer or employment experience:**

Community or civic organizations: \_\_\_\_\_  
\_\_\_\_\_

Criminal justice or health related service: \_\_\_\_\_  
\_\_\_\_\_

Please identify any geographic, racial, ethnic, cultural, or other demographic group you would represent:

\_\_\_\_\_

Please attach a brief resume, with a cover letter that indicates your primary reasons for wanting to be considered for advisory board participation and any unique qualities that would be of benefit to the board.

The board currently meets 6-8 times a year on a Monday at 5:45 p.m. for approximately an hour. The time commitment may increase if needed. Applicants may be subject to a brief interview by the sitting board members.

I certify that:

- I am a resident of Cleveland County.
- Neither I nor any member of my immediate family is employed by the Cleveland County Sheriff's Office.
- I am not a party or a legal representative in litigation against the Sheriff's Office.
- I am prepared to meet the attendance requirements and invest the necessary time in a manner that helps enhance relationships between the Sheriff's Office and the community.
- I will respect and maintain the confidentiality of all matters presented before the board.
- I am not related to Sheriff Todd Gibson.

Signed \_\_\_\_\_

Date \_\_\_\_\_