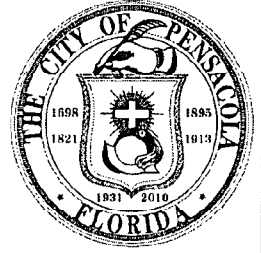


CITY COUNCIL MEMORANDUM

February 20, 2014



TO: City Council

FROM: Ericka L. Burnett, City Clerk *ELB*

SUBJECT: Nominations – Task Force on Improving Human Services

SUMMARY:

On February 13, 2014, City Council adopted resolution No. 02-14, creating the Task Force on Improving Human Services. The Task Force will examine issues surrounding homelessness and ways to improve the delivery of human services.

The Task Force shall be comprised of eleven (11) initial members, one (1) of whom shall be appointed by the Mayor, and ten (10) of whom shall be appointed by majority vote of the City Council and shall consist of the following:

- (a) Three (3) members shall be representatives of local human services or other relevant non-profit organizations.
- (b) One (1) member shall be a representative of the local business community.
- (c) One (1) member shall be a representative of the Pensacola Police Department.
- (d) One (1) member shall be a representative of the City of Pensacola Housing Office.
- (e) One (1) member shall be a civil liberties advocate.
- (f) One (1) member shall be a City Council member.
- (g) Two (2) members shall be other advocates or citizens with relevant expertise or experience.
- (h) Additional members as deemed appropriate by the task force with a maximum of fifteen (15) total members.

Per Section 5 of Resolution No. 02-14, all members of the Task Force shall be appointed no later than thirty (30) days from the date of adoption of the resolution.

Nomination forms are also attached for Council's use and should be submitted to the Clerk's Office by 5:00 P.M. Thursday, February 27, 2014, for consideration at the March 13, 2014 City Council meeting.

Attachments

CITY OF PENSACOLA, FLORIDA

NOMINATION FORM

I, _____, do nominate _____
(Nominee)

(Home Address) (Phone)

(Business Address) (Phone)

(Email Address)

for appointment by the City Council for the position of:

***REPRESENTATIVE OF LOCAL HUMAN SERVICES OR OTHER RELEVANT NON-PROFIT ORGANIZATIONS
TASK FORCE ON IMPROVING HUMAN SERVICES***

Provide a brief description of nominee's qualifications:

City Council Member

I hereby certify that the above nomination was submitted to my office within the time limitations prescribed by the Rules and Procedures of Council.

Ericka L. Burnett, City Clerk

CITY OF PENSACOLA, FLORIDA

NOMINATION FORM

I, _____, do nominate _____
(Nominee)

(Home Address) (Phone)

(Business Address) (Phone)

(Email Address)

for appointment by the City Council for the position of:

***REPRESENTATIVE OF LOCAL HUMAN SERVICES OR OTHER RELEVANT NON-PROFIT ORGANIZATIONS
TASK FORCE ON IMPROVING HUMAN SERVICES***

Provide a brief description of nominee's qualifications:

City Council Member

I hereby certify that the above nomination was submitted to my office within the time limitations prescribed by the Rules and Procedures of Council.

Ericka L. Burnett, City Clerk

CITY OF PENSACOLA, FLORIDA

NOMINATION FORM

I, _____, do nominate _____
(Nominee)

(Home Address) (Phone)

(Business Address) (Phone)

(Email Address)

for appointment by the City Council for the position of:

***REPRESENTATIVE OF LOCAL HUMAN SERVICES OR OTHER RELEVANT NON-PROFIT ORGANIZATIONS
TASK FORCE ON IMPROVING HUMAN SERVICES***

Provide a brief description of nominee's qualifications:

City Council Member

I hereby certify that the above nomination was submitted to my office within the time limitations prescribed by the Rules and Procedures of Council.

Ericka L. Burnett, City Clerk

CITY OF PENSACOLA, FLORIDA

NOMINATION FORM

I, _____, do nominate _____
(Nominee)

(Home Address) (Phone)

(Business Address) (Phone)

(Email Address)

for appointment by the City Council for the position of:

***REPRESENTATIVE OF LOCAL BUSINESS COMMUNITY
TASK FORCE ON IMPROVING HUMAN SERVICES***

Provide a brief description of nominee's qualifications:

City Council Member

I hereby certify that the above nomination was submitted to my office within the time limitations prescribed by the Rules and Procedures of Council.

Ericka L. Burnett, City Clerk

CITY OF PENSACOLA, FLORIDA

NOMINATION FORM

I, _____, do nominate _____
(Nominee)

(Home Address) (Phone)

(Business Address) (Phone)

(Email Address)

for appointment by the City Council for the position of:

***REPRESENTATIVE OF PENSACOLA POLICE DEPARTMENT
TASK FORCE ON IMPROVING HUMAN SERVICES***

Provide a brief description of nominee's qualifications:

City Council Member

I hereby certify that the above nomination was submitted to my office within the time limitations prescribed by the Rules and Procedures of Council.

Ericka L. Burnett, City Clerk

CITY OF PENSACOLA, FLORIDA

NOMINATION FORM

I, _____, do nominate _____
(Nominee)

(Home Address) (Phone)

(Business Address) (Phone)

(Email Address)

for appointment by the City Council for the position of:

***REPRESENTATIVE OF CITY OF PENSACOLA HOUSING OFFICE
TASK FORCE ON IMPROVING HUMAN SERVICES***

Provide a brief description of nominee's qualifications:

City Council Member

I hereby certify that the above nomination was submitted to my office within the time limitations prescribed by the Rules and Procedures of Council.

Ericka L. Burnett, City Clerk

CITY OF PENSACOLA, FLORIDA

NOMINATION FORM

I, _____, do nominate _____
(Nominee)

(Home Address) (Phone)

(Business Address) (Phone)

(Email Address)

for appointment by the City Council for the position of:

***CIVIL LIBERTIES ADVOCATE
TASK FORCE ON IMPROVING HUMAN SERVICES***

Provide a brief description of nominee's qualifications:

City Council Member

I hereby certify that the above nomination was submitted to my office within the time limitations prescribed by the Rules and Procedures of Council.

Ericka L. Burnett, City Clerk

CITY OF PENSACOLA, FLORIDA

NOMINATION FORM

I, _____, do nominate _____
(Nominee)

(Home Address) (Phone)

(Business Address) (Phone)

(Email Address)

for appointment by the City Council for the position of:

***CITY COUNCIL MEMBER
TASK FORCE ON IMPROVING HUMAN SERVICES***

Provide a brief description of nominee's qualifications:

City Council Member

I hereby certify that the above nomination was submitted to my office within the time limitations prescribed by the Rules and Procedures of Council.

Ericka L. Burnett, City Clerk

CITY OF PENSACOLA, FLORIDA

NOMINATION FORM

I, _____, do nominate _____
(Nominee)

(Home Address) (Phone)

(Business Address) (Phone)

(Email Address)

for appointment by the City Council for the position of:

***ADVOCATE OR CITIZEN WITH RELEVANT EXPERTISE OR EXPERIENCE
TASK FORCE ON IMPROVING HUMAN SERVICES***

Provide a brief description of nominee's qualifications:

City Council Member

I hereby certify that the above nomination was submitted to my office within the time limitations prescribed by the Rules and Procedures of Council.

Ericka L. Burnett, City Clerk

CITY OF PENSACOLA, FLORIDA

NOMINATION FORM

I, _____, do nominate _____
(Nominee)

(Home Address) (Phone)

(Business Address) (Phone)

(Email Address)

for appointment by the City Council for the position of:

***ADVOCATE OR CITIZEN WITH RELEVANT EXPERTISE OR EXPERIENCE
TASK FORCE ON IMPROVING HUMAN SERVICES***

Provide a brief description of nominee's qualifications:

City Council Member

I hereby certify that the above nomination was submitted to my office within the time limitations prescribed by the Rules and Procedures of Council.

Ericka L. Burnett, City Clerk