HERNANDO COUNTY BOARD OF COUNTY COMMISSIONERS BOARD/COMMITTEE APPLICATION



Please type or print clearly

Name of Board/Committee Check one:	Full Member Position	
Lucia A. Island	□ Alternate Member Position	
Name Lucas A. Johns	Your name must be listed as it appears on your voter registration card)	
RECORD UPON SUBMIT EXEMPTION TO THE RE THE BASIS OF YOUR EX QUESTIONS COULD RE	RMATION IS REQUIRED FOR COUNTY RECORDS AN TING THIS APPLICATION. IF YOU BELIEVE THAT YOU LEASE OF THIS INFORMATION, PURSUANT TO F.S. I LEMPTION. YOUR FAILURE TO ANSWER FULLY AN SULT IN YOUR APPLICATION BEING DENIED OR OARD/COMMITTEE IF APPOINTED.	OU QUALIFY FOR AN 119.07, PLEASE STATE ID TRUTHFULLY ALL
Address 5300 Felker DR.		
City Weeki Wachee	Zip 34607	
Telephone 352-346-7135	(home) Same	(business)
E-mail address Lucas.John	s@oz-matic.com	
Are you a resident of Herna	ndo County? Yes	
Voter Registration Number	104466256	
Education High school dipl	loma, National Aviation Academy, North Lake Community case include any certificates, awards, diplomas, degrees, professional licenses	College, PHCC.
FDOT certification classes	ease include any certificates, awards, diplomas, degrees, professional ficen-	se numbers, etc.)
See Attachment for more in	nformation.	
Employment History See A	Attachment. tach a resume if available)	
Licenses or Certificates He	FAA-AP license,FDOT-Senior RDWY Inspector.	
See Attachment for more of	ertifications.	
Have you ever previously ap	plied for a position on any County Board/Committee? No	
If yes, please state the Board	(s)/Committee(s) you applied for, when you applied, and whe	ther you were appointed.
misdemeanor? No	ted, plead guilty or no contest, or entered into PTI for a store of store of automatically disqualify you for consideration.	felony or 1 st / 2 nd degree
If yes, what charges?		
	as a defendant in a criminal case? No	
If yes, what charges?		
Have you ever been named as	s a defendant in a civil action suit? No	
If yes, when and describe actio	on.	

riease state your reasons for applying to	this board/Committee		
I would like to do my civic duty and serv	ve my community. I feel my diverse background would be a bennifit		
to the board.			
Please list three character references of pyour company, and whom you have know	ersons NOT related to, NOT an employer, NOT an employee of you or on at least one (1) year. Please include addresses and phone numbers.		
1. Stephanie Kozuch (727)424-8354	Friend		
2. Jeffery Stoffan	Pinellas County Sheriff deputy		
3 Alan Altman (813)783-4434/ (352) 5	567-5641 Pasco County School Board		

I hereby request consideration as a committee/board appointee. It is my intention to familiarize myself to the duties and responsibilities of the office to which I may be appointed, and to fulfill the appointment to the best of my ability, exercising good judgement, fairness, impartiality, and faithful attendance. By my signature below, I hereby authorize Hernando County to check my references and my background, including, without limitation, obtaining a criminal history check. I also agree to file a Financial Disclosure form as required by State law, if applicable, and abide by provisions of the State Sunshine Law.

I hereby swear and affirm, under Penalty of Perjury, that the above information is true and correct.

Applicant s signature Lucas Johns Dogaly signed by Lucas Johns Dogaly Sign

(Please direct all inquiries to the County Administrator's Office at 754-4002.)

Completed applications may be submitted to the County Administrator's office, 15470 Flight Path Drive, Brooksville, Florida 34604, or faxed to 352-754-4025 Attention: Jessica Wright.



Hernando County Background Consent / Release Form

As a volunteer applicant, I understand and acknowledge that an investigative report may be compiled on me. This report may include information regarding any criminal records, and from various public and private sources including law enforcement agencies at the Federal, State or County level, courts record repositories, sexual offender registries and any other source required to verify information that I have voluntarily provided.

PERSONAL INFORMA	TION							
Legal Name:	Lucas Abram Johns	S						
Date of Birth:	04/08/1974	04/08/1974						
Other Names Used:	Lucas		A.	Johns Last				
Other Hames Oscu.	(Legal Name) First		1.I.					
Dates Used (from/to):	, - ,							
Home Phone #:	352-346-7135							
Cell Phone #:	352-346-7135							
E-mail Address:	Lucas.Johns@Oz-matic.com							
Are you 18 years of age				☑ Yes	□ No			
GEOGRAPHIC INFORMATION								
	5300 Felker DR.							
Current Address:	-	24607						
City, State, Zip :	Weeki Wachee, FL.	. 34007						
Time at this address:	16	Years		Month				
Previous Address:	412 Hallcrest Ave.							
City, State, Zip :	Spring hill, FL. 34608							
Time at this address	5	Years	Month					
By signing below, you hereby authorize, empower and release from all liability, without reservation, any agency contacted by Hernando County to furnish the above-mentioned information. You further authorize ongoing procurement of the above-mentioned information at any time during your relationship with Hernando County. You agree that a fax or photocopy of this authorization is to be considered and accepted with the same authority as the original. Comparison of the considered and accepted with the same authority as the original. Typical State Typ								