APPLICATION FOR APPOINTMENT – MARTIN COUNTY NEIGHBORHOOD ADVISORY COMMITTEES – PLEASE PRINT

| ☐ Golden Gate | → Hobe Sound □ Port Salerno | | ☐ Jensen E | Beach |
|--|--|---|--|---|
| □ Old Palm City | | | □ Rio | property owner w/i 1 mile & reg |
| Type of Member check al | | | | voter since 2009 |
| ☐ A resident of the respect registered voter in the resident of Martin Colone year, who is also a ☐ A resident of Martin Colone years, who is also a ☐ A resident of Martin Colone year, who also own ☐ If a business owner/seni | ctive Community espective CRA founty, as evidence business owner unty, as evidence a senior manager unty, as evidence is real property wor manager - nar | or at least one ed by being a of a business ed by being a r of a busines ed by being a vithin a mile of me & physical property with | e year, or registered volume located with registered volumes located with registered volumes for the respect al address of the mile of the respect of the re | |
| Check One: ☐ Mr. ☑ Mrs | s. 🗆 Ms. 🗆 Mis | ss □ Dr. | | |
| Name: Emily Thorsen | I | ncumbe | nt | |
| Residence Address: 8102 | SE Shiloh Terrace | e, Hobe Sound | FL 33455 | Street/City/Zip Code |
| Mailing Address: | | | | Street/City/Zip Code |
| Commission District in which | ch you reside: _ | 3 ^{dg} | Staff will comp | lete. |
| Are you available year round to attend meetings? ☑ yes ☐ no If no , what months <u>are</u> you available? | | | | |
| Telephone numbers: daytin | ne: (772) 285-67 ~Area Codes are co | 243 alternate | e: ss you note othe | alternate: |
| EMAIL: emilyjoythorsen@gr | mail.com | | | |
| prosecution deferred, been pl | laced on probation or traffic violations)' | n, received a si ? Please show | uspended sen all conviction | a crime, had adjudication withheld, itence or forfeited bail in connection is, including driving while intoxicated ation: |
| TYPE OF OFFENCES: | | | | |
| DATES: | | | | |
| PLACES (city/state): | | | | |

| SENTENCES OR FINES: |
|---|
| A conviction record does not necessarily disqualify you for consideration. Factors such as age at time of offense, nature of violation, and rehabilitation will be considered. The Martin County Board of County Commissioners retains the right to remove, at will, any appointee to a Board or Committee with or without cause. |
| EDUCATION/EXPERIENCE: A resume is recommended to be attached containing this and any other information that would be helpful to the Board in evaluating your application. Resume or letter of qualifications attached? \square yes \square no |
| Education: BA Graphic Design, Flagler College |
| Employment Experience: Creative Director, Producer |
| Self employed |
| Other experience you feel would be helpful to the Board in making this appointment: |
| NAC board member through July 2025 |
| Community Experience and Affiliations: |
| Other County Boards/Committees/Task Forces on which you have served: |
| Do you or any member of your immediate family work for Martin County or do you or a company that you are an officer or employee of have an existing contract with Martin County? If yes, please explain: |
| No No |
| REFERENCES: Please list two references: |
| Robert Holland, (772) 285-6743 Business Partner Karla Preissman, (772) 233-0119 Local Client |
| Applicant may be required by State Law and County Ordinance to file a Financial Disclosure Statement as part of the appointment process. Florida law prohibits an advisory board member from doing business with its agency (the County). Sections 112.313(3) and (7), Florida Statutes. However, upon full disclosure by the Applicant, the conflict may be waived at the discretion of the Board of County Commissioners by a supermajority vote. Section 112.313(12), Florida Statutes. |

→ Signature: (mily Thorsen Applications must be filed with Martin County Administration, 2401 SE Monterey Road, Stuart, Florida 34996 by Friday, July 18, 2025. All information submitted becomes public record. If you have any questions, please call (772) 221-1352 or send email to dgordon@martin.fl.us.

Date: July 10, 2025