

**Application Form**

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**Profile**

Thelma

First Name

Williams

Last Name

thelma.williams@hsahospitals.com

Email Address

7120 NW 48th CT

Home Address

Lauderhill

City

FL

State

33319

Postal Code

Mobile: (954) 552-4530

Primary Phone

**Which Boards would you like to apply for?**

Public Art Committee: Eligible

**Are you a Lauderhill resident?** Yes  No**How long have you been a Lauderhill resident?**

25 years

**Are you a registered voter in Broward County?** Yes  No**Do you have a contract or do business with the city?** Yes  No**Please list the name of any business you, your spouse, or your child(ren) have a material interest in:**

None

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**Interests & Experiences****Have you served on a City board before?** Yes  No

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**If yes, which board? How many years?**

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NA

**Why are you interested in serving on a board? If you have not attached a resume, please describe any qualifications, skills, and abilities you possess that would directly benefit this board.**

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I have been a resident of Lauderhill for twenty-five years. I currently work as a registered nurse at a nearby hospital. I am a master's prepared registered nurse with a wealth of experience both in healthcare and education. I am interested in joining this particular board because I would like to see the civic pride and aesthetics of this community being elevated to its highest point and with excellence. Working with this committee we can bring back the pride and joy of Lauderhill and thereby motivate others to join in not only to enjoy but also to help maintain the beauty and availability of communal activities within the city.

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**Board Specific Questions**

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**Referral**

**Please indicate who referred you to this opportunity (e.g., Commissioner, Board Member, Staff, etc.).**

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Michelle McKoy

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**Demographics****Ethnicity \***

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 Other**Gender \***

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 Female

01/01/1957

Date of Birth

Thelma Williams