



APPLICATION FOR APPOINTMENT - CITY COUNCIL SEAT 5

City of Palm Bay • 120 Malabar Road • Palm Bay, FL 32907
Phone: 321-952-3414 • www.palmbayflorida.org • Fax: 321-953-8971

Full Name: Denise Ann Bowes

Home Address: 1298 Coral Reef Ave

City: Palm Bay

Telephone Number: 321-223-3999 Zip Code: 32907

Email Address: R2scholarships@gmail.com Fax Number:

EMPLOYMENT

Employer: Dept. of Children & families Occupation: Child Protective Inv. Supervisor

Address: 315 Commerce PKWY

City: Rockledge State: FL Zip Code:

Telephone Number: 321-480-8422 Fax Number:

Email Address: denise.bowes@myflfamilies.com

Job Responsibilities: Give guidance to child protective investigators who investigate child neglect

EDUCATION

High School Name: Clara Barton

Location: Brooklyn N.Y. Years Completed: 4 Major/Degree: Business

College Business or Trade School: John Jay College of Criminal Justice

Location: Manhattan Years Completed: 2 Major/Degree: Criminal Justice

College College

Professional School: Everest University

Location: Melbourne FL Years Completed: 2 Major/Degree: Business

Other:

Location: Years Completed: Major/Degree:

APPLICANT INFORMATION

Have you ever held a business tax receipt? Yes No *If yes, please provide the following:*

Title:

Issue Date: Issuing Authority:

If any disciplinary action has been taken, please state the type and date of the action taken:

Disciplinary Action: Disciplinary Date:

Are you a resident of the City? Yes No *If yes, how long?* Years Months

How long have you been a resident of Brevard County? Years Months

Are you a United States citizen? Yes No

Are you a registered voter of the City? Yes No

Are you employed by the City? Yes No *If yes, what department?*

Do you presently serve on a City board(s)? Yes No *If yes, please list board(s):*

Have you previously served on a City board(s)? Yes No *If yes, please list board(s):*

Youth Advisory board & Recreation Board

Are you currently serving on a board, authority, or commission for another governmental agency?

Yes No *If yes, what board(s):*

Have you ever been convicted or pled guilty to a criminal charge or pled nolo contendere (no contest)

to a criminal charge? Yes No *If yes, what charge:*

Where: When:

Disposition was: Convicted Pled Guilty Pled No Contest

Have your civil rights been restored? Yes No

Are you a member or participant of any community organizations? Yes No

If yes, please list: SEABBO - Board member Road To Scholarships owner

What are your hobbies / interests? My hobbies are reading, planting and
Volunteering with Pruders to obtain scholarships for
college.

Why do you want to serve on City Council? As a state employee working
with the community and serving the not vulnerable has been
a passion that has been purposeful for provided the
motivation for me to strive to do more for my community

APPLICATION CERTIFICATION

By filing this application with the City of Palm Bay and placing my signature below, I do hereby acknowledge the following:

- 1. This Application, when completed and filed with the Office of the City Clerk, is a PUBLIC RECORD under Chapter 119, Florida Statutes, and is open to public inspection.
- 2. I am responsible for keeping the information on this form current and that any changes or updates will be provided to the Office of the City Clerk.
- 3. I consent to filing the Statement of Financial Interests. <http://www.ethics.state.fl.us>
- 4. If appointed, I acknowledge that it is my obligation and duty to comply with the following:

Code of Ethics for Public Officials (Florida Statutes, Chapter 112, Part III)
Florida Sunshine Law (Florida Statutes, Chapter 286)
<http://www.flsenate.gov/Statutes>

- 5. I understand the responsibilities associated with being a council member, and will have adequate time to serve on City Council.

The information provided on this form is true and correct, and consent is hereby given to the City Council or its designated representative to verify any and/or all information provided.

Signature: Dennis J. Bowes

3/29/23

Submit the application to:
City of Palm Bay
Office of the City Clerk
120 Malabar Road, SE
Palm Bay, Florida 32907

City of Palm Bay, Florida

RESIDENCY OF CANDIDATE AFFIDAVIT

I, Denise A. Bowes, a candidate for the Office of City Council (check one);

- Mayor
- City Council Seat 2
- City Council Seat 3
- City Council Seat 4
- City Council Seat 5

do hereby solemnly swear or affirm:

- 1) I have been a resident of the City of Palm Bay for at least two (2) years immediately preceding the selection date (April 13, 2023).
 - 2) I am a registered voter of the City of Palm Bay, residing at a City address.
 - 3) Have you ever been convicted of a felony? Yes No
- If 'yes', have your civil rights been restored? Yes No

UNDER PENALTY OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS STATED IN IT ARE TRUE.

3/29/23 Denise A. Bowes
Date Signature of Candidate

Address: 1298 Coral Reef Ave

City: Palm Bay State: FL Zip Code: 32907



AUTHORIZATION TO OBTAIN FDLE BACKGROUND REPORT(S)

I hereby authorize the City of Palm Bay (the "City") to request and receive criminal history record information from the Florida Department of Law Enforcement (FDLE) or similar law enforcement/governmental agencies about me for purposes of City Council considering my application to be appointed to a current vacancy on the City Council, including but not limited to, for purposes of confirming my fitness for initial appointment to fill this vacancy, and any other use not prohibited by law. I acknowledge the criminal history report will be provided to City Council to aid in their decision making. I understand that I may withhold my permission and that in such a case, no investigation will be done, and the City Council will not consider my application to fill the vacant seat on City Council.

This Authorization is valid for current reports, and I specifically understand that the City intends for this Authorization to cover only my application for the current vacancy. I further understand that I am responsible for the costs associated with the criminal background check (\$24.00*).

Denise A. Barnes

Printed Name (First, Middle, Last)

Denise A. Barnes

Signature

3/29/23

Date

*Payable by check, cash or money order

