

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
BOARD APPOINTMENT SUMMARY**

**Meeting Date:** April 1, 2008

**Department:** Community Services

**Advisory Board Name:** Head Start/Early Head Start Policy Council

**I. EXECUTIVE BRIEF**

Staff recommends motion to approve: appointment of the following Parent Representatives to the Head Start/Early Head Start Policy Council for a term of April 1, 2008 through September 26, 2009.

**PARENT REPRESENTATIVE AND ALTERNATE(S) BY CENTER**

(R) = Representative

(A) = Alternate

<b><u>Seat ID #</u></b>	<b><u>Boynton Beach</u></b>	<b><u>Seat ID #</u></b>	<b><u>Jupiter</u></b>
10	Torlande Saintizaire (R) Eunice Hernandez (A)	11	Edward H. Gaynes (R) Terry A. Smith (A)
<b><u>Seat ID #</u></b>	<b><u>Palm Glades</u></b>	<b><u>Seat ID #</u></b>	<b><u>Delray Beach HS</u></b>
13	Marcus Saddler (R) Marlene Cardova (A) Maria Galvan (A)	14	Frances Young (R) Valentia Valceus (A) Miglaise Mythil (A)
<b><u>Seat ID #</u></b>	<b><u>Pahokee</u></b>	<b><u>Seat ID #</u></b>	<b><u>Westgate</u></b>
15	Lorraine Fulton (R) Joenisha Miller (A)	16	Blondsha Harris (R) Rosetta Saez (A)
<b><u>Seat ID #</u></b>	<b><u>Lake Worth</u></b>	<b><u>Seat ID #</u></b>	<b><u>Riviera Beach</u></b>
17	Gary A. Moorer (R) Featger A. Kemp (A)	18	Toya A. Wilson (R) Lenora Price (A) Tawania L. Nubin Sr. (A)
<b><u>Seat ID #</u></b>	<b><u>Union Baptist</u></b>	<b><u>Seat ID #</u></b>	<b><u>Delray Beach EHS</u></b>
20	Shelly-Ann M. Blake (R) Tonya L. Adams (A) Bulmoro Santico (A)	21	Crystal L. Scott (R)
<b><u>Seat ID #</u></b>	<b><u>Family Child Care Home</u></b>	<b><u>Seat ID #</u></b>	<b><u>Apostolic CDC, Inc.</u></b>
23	Nancy Lopez (R)	26	Latresa Chapelle (R) Erica Williams (A)
<b><u>Seat ID #</u></b>	<b><u>A Step Above</u></b>	<b><u>Seat ID #</u></b>	<b><u>Emmanuel EHS</u></b>
27	Danielle S. Herbert (R)	28	Zaveka Miller (R) Stephanie Baker (A)
<b><u>Seat ID #</u></b>	<b><u>King's Kids</u></b>	<b><u>Seat ID #</u></b>	<b><u>San Castle</u></b>
29	Joscelyn I. Walker (R) Mary L. Joseph (A) Mary Christie (A)	31	Elda Molina (R) Annette Hamilton (A) Patricia Rosales (A)
<b><u>Seat ID #</u></b>	<b><u>South Bay, EHS</u></b>		
32	Sharicia V. Allen (R) Johnathan Bolanos (A)		

**Summary:** (cont'd on Page 3)

**Background and Justification:** (cont'd on Page 3)

**Attachments:**

1. Head Start/Early Head Start Policy Council Resolution Number R-2006-1878
2. Board Appointment Information Forms
3. Head Start/Early Head Start Policy Council Current Board Member Listing

**Recommended by:**

  
Department Director

  
Date

**Legal Sufficiency:**

  
Assistant County Attorney

  
Date

**II. REVIEW COMMENTS**

**A. Other Department Review:**

---

**Department Director**

**(THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT.)**

**Summary:** The term of appointment for parent representatives and alternates to the Head Start/Early Head Start (HS/EHS) Policy Council is no more than three (3) years, and requires that the parent representative/alternate be a parent of a child enrolled in the HS/EHS program. The Council is comprised of thirty-three (33) members, of which nine (9) must be representatives of the community. The remaining membership is comprised of parents whose children are actively enrolled in the HS/EHS program. The HS/EHS Start Policy Council has recommended these individuals for appointment. (Head Start) Countywide (TKF)

**Background and Justification:** The authority for the HS/EHS Policy Council is provided by Resolution R2006-1878. The Council responsibilities include establishing a method of hearing and resolving community complaints about the HS/EHS program, conducting self-evaluations, identifying child development needs, ensuring that space, equipment and supplies are acquired as needed. They may also be consulted on the directive given to HS/EHS staff in day-to-day operations.

## Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Representative - Boynton Beach      Seat #: 10

or ☒ to complete the term of Stephanie Taylor Due to: ☐ resignation ☒ other

Completion of term to expire on: 09/26/2009

<input type="checkbox"/> IF (Native-American Female)	<input type="checkbox"/> IM (Native-American Indian Male)
<input type="checkbox"/> AF (Asian-American Female)	<input type="checkbox"/> AM (Asian-American Male)
<input type="checkbox"/> BF (African-American Female)	<input checked="" type="checkbox"/> BM (African-American Male)
<input type="checkbox"/> HF (Hispanic-American Female)	<input type="checkbox"/> HM (Hispanic-American Male)
<input type="checkbox"/> WF (Caucasian Female)	<input type="checkbox"/> WM (Caucasian Male)

## Revised 6/2007

## Part I:

☒ At Large Appointment

**or**

**or**



## Part II:

Last

First

### **Part III: COMMISSIONER COMMENTS**

Revised 6/2007

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
ADVISORY BOARD NOMINEE INFORMATION FORM**

**Part I:**

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: \_\_\_\_\_ Years. From: 04/01/2008 To: 09/26/2009

Seat Requirement: Representative - Jupiter Seat #: 11

☐ \*Reappointment

or

☐ New Appointment

or ☒ to complete the term of Cristina Martinez Due to: ☐ resignation ☒ other

Completion of term to expire on: 09/26/2009

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Name: Gaynes, Edward H.  
Last First Middle

Occupation/Affiliation: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City & State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 7388 165th Street

City & State Palm Beach Gardens, FL Zip Code: 33458

Home Phone: (561) 741-8011 Business Phone: (561) 818-9486 ext. \_\_\_\_\_

Cell Phone: ( ) Fax: ( )

Email Address: \_\_\_\_\_

Mailing Address preference: ☐ Business Address ☒ Residence

**Minority Identification Code:**

☐ IF (Native-American Female)

☐ IM (Native-American Indian Male)

☐ AF (Asian-American Female)

☐ AM (Asian-American Male)

☐ BF (African-American Female)

☐ BM (African-American Male)

☐ HF (Hispanic-American Female)

☐ HM (Hispanic-American Male)

☐ WF (Caucasian Female)

☒ WM (Caucasian Male)

**Part III:** COMMISSIONER COMMENTS

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

\_\_\_\_\_ Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

## Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Alternate - Jupiter Seat #: 11-A

**Part II:**      ***APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

### **Part III: COMMISSIONER COMMENTS**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Revised 6/2007





## Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Alternate - Palm Glades Seat #: 13-B

Completion of term to  
expire on: \_\_\_\_\_

## Revised 6/2007

## Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Representative - Delray Beach HS      Seat #: 14

☐ \*Reappointment                      or                      ☐ New Appointment

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Occupation/Affiliation: Retired

Business Name:

Business Address:

City &amp; State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 332 S. Swinton Ave.

City &amp; State Delray Beach, FL Zip Code: 33444

Home Phone: (561) 243-1264 Business Phone: ( ) ext. \_\_\_\_\_

Cell Phone: (561) 715-8964 Fax: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

- ☐ IF (Native-American Female)      ☐ IM (Native-American Indian Male)  
☐ AF (Asian-American Female)      ☐ AM (Asian-American Male)  
☒ BF (African-American Female)      ☐ BM (African-American Male)  
☐ HF (Hispanic-American Female)      ☐ HM (Hispanic-American Male)  
☐ WF (Caucasian Female)      ☐ WM (Caucasian Male)

### **Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

## Part I:

☒ At Large Appointment

**or**

☐ \*Reappointment

**or**

**Gloria Bostwick**



resignation



other

09/26/2009

☐ IF (Native-American Female)

☐ AF (Asian-American Female)

☒ BF (African-American Female)

☐ HF (Hispanic-American Female)☐ WF (Caucasian Female)☐ IM (Native-American Indian Male)

☐ AM (Asian-American Male)

☐ BM (African-American Male)☐ HM (Hispanic-American Male)

☐ WM (Caucasian Male)

## Revised 6/2007

## Part I:

☒ At Large Appointment      or      ☐ District Appointment

**Seat Requirement:** Alternate - Delray Beach HS                      **Seat #:** 14-B

☐ \*Reappointment                      or                      ☒ New Appointment

Completion of term to  
expire on: \_\_\_\_\_

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

City &amp; State \_\_\_\_\_ Zip Code: \_\_\_\_\_

City &amp; State Delray Beach, FL Zip Code: 33445

Home Phone: (561) 306-9916 Business Phone: ( ) ext.

Cell Phone: ( ) Fax: ( )

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

☐ IF (Native-American Female)      ☐ IM (Native-American Indian Male)  
☐ AF (Asian-American Female)      ☐ AM (Asian-American Male)  
☒ BF (African-American Female)      ☐ BM (African-American Male)  
☐ HF (Hispanic-American Female)      ☐ HM (Hispanic-American Male)  
☐ WF (Caucasian Female)      ☐ WM (Caucasian Male)

### **Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

\_\_\_\_ Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

## Part I:

☒ At Large Appointment      or      ☐ District Appointment

**Seat Requirement:** Representative - Pahokee      **Seat #:** 15

☐ \*Reappointment                      or                      ☐ New Appointment

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Occupation/Affiliation: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City &amp; State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 875 Padgett Circle

City &amp; State                  Pahokee, FL                                      Zip Code:        33476

Home Phone: (561) 924-2192 Business Phone: ( ) ext.       

Cell Phone: (561) 277-0844 Fax: ( )

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

☐ IF (Native-American Female)      ☐ IM (Native-American Indian Male)  
☐ AF (Asian-American Female)      ☐ AM (Asian-American Male)  
☒ BF (African-American Female)      ☐ BM (African-American Male)  
☐ HF (Hispanic-American Female)      ☐ HM (Hispanic-American Male)  
☐ WF (Caucasian Female)      ☐ WM (Caucasian Male)

### **Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
ADVISORY BOARD NOMINEE INFORMATION FORM**

**Part I:**

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: \_\_\_\_\_ Years. From: 04/01/2008 To: 09/26/2009

Seat Requirement: Alternate - Pahokee Seat #: 15-A

☐ \*Reappointment

or

☐ New Appointment

or ☒ to complete the  
term of

Tina Vann

Due  
to:

☐ resignation

☒ other

Completion of term to  
expire on:

09/26/2009

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Name: Miller, Joenisha  
Last First Middle

Occupation/Affiliation: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City & State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 319 Shirley Drive

City & State Pahokee, FL Zip Code: 33476

Home Phone: (561) 924-6099 Business Phone: ( ) ext. \_\_\_\_\_

Cell Phone: (561) 261-1359 Fax: ( )

Email Address: \_\_\_\_\_

Mailing Address preference: ☐ Business Address ☒ Residence

**Minority Identification Code:**

☐ IF (Native-American Female)

☐ IM (Native-American Indian Male)

☐ AF (Asian-American Female)

☐ AM (Asian-American Male)

☒ BF (African-American Female)

☐ BM (African-American Male)

☐ HF (Hispanic-American Female)

☐ HM (Hispanic-American Male)

☐ WF (Caucasian Female)

☐ WM (Caucasian Male)

**Part III:** COMMISSIONER COMMENTS

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

\_\_\_\_\_ Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed  
and photocopied by members of the public.

Revised 6/2007



### Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Alternate - Westgate

☐ \*Reappointment                      or                      ☐ New Appointment

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Occupation/Affiliation: Homemaker

Business Name: \_\_\_\_\_

Business Address:

City &amp; State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 1838 Abbey Road #K-102

City &amp; State: West Palm Beach, FL Zip Code: 33409

Home Phone: (561) 502-2866 Business Phone: ( ) ext.     

Cell Phone: (561) 502-5121 Fax: ( )

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

- ☐ IF (Native-American Female)      ☐ IM (Native-American Indian Male)  
☐ AF (Asian-American Female)      ☐ AM (Asian-American Male)  
☒ BF (African-American Female)      ☐ BM (African-American Male)  
☐ HF (Hispanic-American Female)      ☐ HM (Hispanic-American Male)  
☐ WF (Caucasian Female)      ☐ WM (Caucasian Male)

### **Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

## Part I:

☒ At Large Appointment                  or                  ☐ District Appointment

Seat Requirement: Representative - Lake Worth Seat #: 17

☐ \*Reappointment                      or                      ☐ New Appointment

**Part II:**     ***APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

Occupation/Affiliation: Nurse Assistant

**Business Name:** Catalino's Nursing Registry

Business Address: 15200 Jog Road

City &amp; State Delray Beach, FL Zip Code: 33406

Residence Address: 6335 Pinestead Dr. #912

City &amp; State Lake Worth, FL Zip Code: 33463

Home Phone: ( ) Business Phone: ( ) ext.

Cell Phone: (561) 541-1146 Fax: ( )

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

<input type="checkbox"/> IF (Native-American Female)	<input type="checkbox"/> IM (Native-American Indian Male)
<input type="checkbox"/> AF (Asian-American Female)	<input type="checkbox"/> AM (Asian-American Male)
<input type="checkbox"/> BF (African-American Female)	<input checked="" type="checkbox"/> BM (African-American Male)
<input type="checkbox"/> HF (Hispanic-American Female)	<input type="checkbox"/> HM (Hispanic-American Male)
<input type="checkbox"/> WF (Caucasian Female)	<input type="checkbox"/> WM (Caucasian Male)

### **Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

## Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Alternate - Lake Worth Seat #: 17-A

Completion of term to  
expire on: 09/26/2009

## Revised 6/2007

## Part I:

☒ At Large Appointment      or      ☐ District Appointment

**Seat Requirement:** Alternate - Emmanuel EHS \_\_\_\_\_ **Seat #:** 28-A

☐ \*Reappointment                      or                      ☒ New Appointment

**Part II: *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

Occupation/Affiliation: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City &amp; State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 4266 Wood Stock Drive, #D

City &amp; State                      West Palm Beach, FL                      Zip Code:                      33409

Home Phone: (561) 602-6548 Business Phone: ( ) ext.

Cell Phone: ( ) Fax: ( )

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

- ☐ IF (Native-American Female)      ☐ IM (Native-American Indian Male)  
☐ AF (Asian-American Female)      ☐ AM (Asian-American Male)  
☒ BF (African-American Female)      ☐ BM (African-American Male)  
☐ HF (Hispanic-American Female)      ☐ HM (Hispanic-American Male)  
☐ WF (Caucasian Female)      ☐ WM (Caucasian Male)

### Part III: COMMISSIONER COMMENTS

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
ADVISORY BOARD NOMINEE INFORMATION FORM**

**Part I:**

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: \_\_\_\_\_ Years. From: 04/01/2008 To: 09/26/2009

Seat Requirement: Representative - King's Kids Seat #: 29

☐ \*Reappointment

or

☐ New Appointment

or ☒ to complete the  
term of

Crystal Dalrymple

Due  
to:

☐

resignation

☒

other

Completion of term to  
expire on:

09/26/2009

**Part II:      *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

Name: Walker, Joscelyn I.  
Last First Middle

Occupation/Affiliation: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City & State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 5055 Palm Hill Dr. #316

City & State West Palm Beach, FL Zip Code: 33415

Home Phone: ( ) Business Phone: ( ) ext. \_\_\_\_\_

Cell Phone: (561) 294-6272 Fax: ( )

Email Address: \_\_\_\_\_

Mailing Address preference: ☐ Business Address ☒ Residence

**Minority Identification Code:**

☐ IF (Native-American Female)

☐ IM (Native-American Indian Male)

☐ AF (Asian-American Female)

☐ AM (Asian-American Male)

☐ BF (African-American Female)

☒ BM (African-American Male)

☐ HF (Hispanic-American Female)

☐ HM (Hispanic-American Male)

☐ WF (Caucasian Female)

☐ WM (Caucasian Male)

**Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

\_\_\_\_\_ Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed  
and photocopied by members of the public.

Revised 6/2007

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
ADVISORY BOARD NOMINEE INFORMATION FORM**

**Part I:**

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: \_\_\_\_\_ Years. From: 04/01/2008 To: 09/26/2009

Seat Requirement: Alternate - King's Kids Seat #: 29-A

☐ \*Reappointment

or

☒ New Appointment

or ☐ to complete the  
term of \_\_\_\_\_

Due ☐ resignation ☒ other  
to: \_\_\_\_\_

Completion of term to  
expire on: \_\_\_\_\_

**Part II:     *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

Name: Joseph, Mary L.  
Last First Middle

Occupation/Affiliation: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City & State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 5865 N. Haverhill Rd. #3003

City & State West Palm Beach, FL Zip Code: 33407

Home Phone: (561) 712-7189 Business Phone: ( ) ext. \_\_\_\_\_

Cell Phone: (561) 572-5044 Fax: ( )

Email Address: \_\_\_\_\_

Mailing Address preference: ☐ Business Address ☒ Residence

**Minority Identification Code:**

- |  |   |
|--|---|
| <input type="checkbox"/> IF (Native-American Female)             | <input type="checkbox"/> IM (Native-American Indian Male) |
| <input type="checkbox"/> AF (Asian-American Female)              | <input type="checkbox"/> AM (Asian-American Male)         |
| <input checked="" type="checkbox"/> BF (African-American Female) | <input type="checkbox"/> BM (African-American Male)       |
| <input type="checkbox"/> HF (Hispanic-American Female)           | <input type="checkbox"/> HM (Hispanic-American Male)      |
| <input type="checkbox"/> WF (Caucasian Female)                   | <input type="checkbox"/> WM (Caucasian Male)              |

**Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

\_\_\_\_\_ Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed  
and photocopied by members of the public.

Revised 6/2007

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
ADVISORY BOARD NOMINEE INFORMATION FORM**

**Part I:**

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: \_\_\_\_\_ Years. From: 04/01/2008 To: 09/26/2009

Seat Requirement: Alternate - King's Kids Seat #: 29-B

☐ \*Reappointment

or

☒ New Appointment

or ☐ to complete the  
term of \_\_\_\_\_

Due ☐ resignation ☒ other  
to: \_\_\_\_\_

Completion of term to  
expire on: \_\_\_\_\_

**Part II:     *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

Name: Christie, Mary I.  
Last First Middle

Occupation/Affiliation: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City & State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 5393 Eadie Place

City & State West Palm Beach, FL Zip Code: 33407

Home Phone: (561) 809-4443 Business Phone: ( ) ext. \_\_\_\_\_

Cell Phone: ( ) Fax: ( )

Email Address: \_\_\_\_\_

Mailing Address preference: ☐ Business Address ☒ Residence

**Minority Identification Code:**

☐ IF (Native-American Female)

☐ IM (Native-American Indian Male)

☐ AF (Asian-American Female)

☐ AM (Asian-American Male)

☒ BF (African-American Female)

☐ BM (African-American Male)

☐ HF (Hispanic-American Female)

☐ HM (Hispanic-American Male)

☐ WF (Caucasian Female)

☐ WM (Caucasian Male)

**Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

\_\_\_\_\_ Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed  
and photocopied by members of the public.

Revised 6/2007

### Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Representative - San Castle EHS

☐ \*Reappointment                      or                      ☐ New Appointment

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

**Mailing Address preference:** ☐ Business Address ☒ Residence

☐ IF (Native-American Female)      ☐ IM (Native-American Indian Male)  
☐ AF (Asian-American Female)      ☐ AM (Asian-American Male)  
☐ BF (African-American Female)      ☐ BM (African-American Male)  
☒ HF (Hispanic-American Female)      ☐ HM (Hispanic-American Male)  
☐ WF (Caucasian Female)      ☐ WM (Caucasian Male)

Appointment to be made at BCC Meeting on: April 1, 2008

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Revised 6/2007

## Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Representative -Riviera Beach

☐ \*Reappointment                      or                      ☐ New Appointment

**Part II:**     ***APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

Occupation/Affiliation: General Office Clerk

**Business Name:** South Florida Water Management District

Business Address: 3301 Gun Club Road

City &amp; State West Palm Beach, FL Zip Code: 33401

Residence Address: 1641 West 17th Street

City &amp; State Riviera Beach, FL Zip Code: 33404

Home Phone: (561) 667-7054 Business Phone: (561) 694-9248 ext. \_\_\_\_\_

Cell Phone: ( ) Fax: ( )

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

- |  |   |
|--|---|
| <input type="checkbox"/> IF (Native-American Female)             | <input type="checkbox"/> IM (Native-American Indian Male) |
| <input type="checkbox"/> AF (Asian-American Female)              | <input type="checkbox"/> AM (Asian-American Male)         |
| <input checked="" type="checkbox"/> BF (African-American Female) | <input type="checkbox"/> BM (African-American Male)       |
| <input type="checkbox"/> HF (Hispanic-American Female)           | <input type="checkbox"/> HM (Hispanic-American Male)      |
| <input type="checkbox"/> WF (Caucasian Female)                   | <input type="checkbox"/> WM (Caucasian Male)              |

### **Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
ADVISORY BOARD NOMINEE INFORMATION FORM**

**Part I:**

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: \_\_\_\_\_ Years. From: 04/01/2008 To: 09/26/2009

Seat Requirement: Alternate -Riviera Beach Seat #: 18-A

☐ \*Reappointment

or

☐ New Appointment

or ☒ to complete the  
term of

Tenisha Easter

Due  
to:

☐ resignation

☒ other

Completion of term to  
expire on:

09/26/2009

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Name: Price, Lenora  
Last First Middle

Occupation/Affiliation: Self-Employed

Business Name: Top Notch Window Cleaning Services

Business Address: 1621 W. 37th Street

City & State Riviera Beach, FL Zip Code: 33404

Residence Address: Same As Above

City & State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (561) 541-4366 Business Phone: ( ) ext. \_\_\_\_\_

Cell Phone: ( ) Fax: ( )

Email Address: \_\_\_\_\_

Mailing Address preference: ☐ Business Address ☒ Residence

**Minority Identification Code:**

☐ IF (Native-American Female)

☐ IM (Native-American Indian Male)

☐ AF (Asian-American Female)

☐ AM (Asian-American Male)

☒ BF (African-American Female)

☐ BM (African-American Male)

☐ HF (Hispanic-American Female)

☐ HM (Hispanic-American Male)

☐ WF (Caucasian Female)

☐ WM (Caucasian Male)

**Part III:** COMMISSIONER COMMENTS

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

\_\_\_\_\_ Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed  
and photocopied by members of the public.

Revised 6/2007



## Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Representative - Union Baptist      Seat #: 20

☐ \*Reappointment                      or                      ☐ New Appointment

**Part II:**      ***APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

Occupation/Affiliation: Billing/Coding

Business Name: PBR MRI

Business Address: 701 Northlake Blvd.

City & State North Palm Beach, FL Zip Code: 33408

Residence Address: 4680 N. Congress Avenue

City & State West Palm Beach, FL Zip Code: 33407

Home Phone: ( ) Business Phone: (561) 882-0671 ext.

Cell Phone: (561) 267-5896 Fax: ( )

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

☐ IF (Native-American Female)      ☐ IM (Native-American Indian Male)  
☐ AF (Asian-American Female)      ☐ AM (Asian-American Male)  
☒ BF (African-American Female)      ☐ BM (African-American Male)  
☐ HF (Hispanic-American Female)      ☐ HM (Hispanic-American Male)  
☐ WF (Caucasian Female)      ☐ WM (Caucasian Male)

### **Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

## Part I:

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

☐ IF (Native-American Female)      ☐ IM (Native-American Indian Male)  
☐ AF (Asian-American Female)      ☐ AM (Asian-American Male)  
☒ BF (African-American Female)      ☐ BM (African-American Male)  
☐ HF (Hispanic-American Female)      ☐ HM (Hispanic-American Male)  
☐ WF (Caucasian Female)      ☐ WM (Caucasian Male)

## Revised 6/2007

### Part I:

Completion of term to  
expire on:

☐ IF (Native-American Female) ☐ IM (Native-American Indian Male)

☐ AF (Asian-American Female) ☐ AM (Asian-American Male)

☐ BF (African-American Female) ☐ BM (African-American Male)

☐ HF (Hispanic-American Female) ☒ HM (Hispanic-American Male)

☐ WF (Caucasian Female) ☐ WM (Caucasian Male)

## Revised 6/2007



## Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Representative - Family Child Care Home Seat #: 23

☐ \*Reappointment                      or                      ☐ New Appointment

**Part II:**      ***APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

Occupation/Affiliation: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City &amp; State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 1140 NE 20th Street

City & State Belle Glade, FL Zip Code: 33430

Home Phone: (561) 986-7712 Business Phone: ( ) ext.

Cell Phone: ( ) Fax: ( )

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

- ### **Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

## Part I:

Completion of term to  
expire on: 09/26/2009

## Revised 6/2007

## Part I:

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Revised 6/2007

## Part I:

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Revised 6/2007

## Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Representative - Emmanuel EHS      Seat #: 28

☐ \*Reappointment                      or                      ☐ New Appointment

**Part II:**      ***APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

Occupation/Affiliation: Clerical

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City &amp; State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 1465 North Mangonia Circle

City &amp; State: West Palm Beach, FL Zip Code: 33401

Home Phone: (561) 802-1731 Business Phone: ( ) ext.

Cell Phone: (561) 603-7101 Fax: ( )

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

- ☐ IF (Native-American Female)      ☐ IM (Native-American Indian Male)  
☐ AF (Asian-American Female)      ☐ AM (Asian-American Male)  
☒ BF (African-American Female)      ☐ BM (African-American Male)  
☐ HF (Hispanic-American Female)      ☐ HM (Hispanic-American Male)  
☐ WF (Caucasian Female)      ☐ WM (Caucasian Male)

### **Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
ADVISORY BOARD NOMINEE INFORMATION FORM**

**Part I:**

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: \_\_\_\_\_ Years. From: 04/01/2008 To: 09/26/2009

Seat Requirement: Alternate - San Castle EHS Seat #: 31-A

☐ \*Reappointment

or

☐ New Appointment

or ☒ to complete the  
term of

Elda Molina

Due  
to:

☐ resignation

☒ other

Completion of term to  
expire on:

09/26/2009

**Part II:      *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT***

Name: Hamilton, Annette  
Last First Middle

Occupation/Affiliation: Clerical

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City & State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 391 Glenwood Drive

City & State West Palm Beach, FL Zip Code: 33415

Home Phone: (561) 635-2979 Business Phone: (561) 355-2010 ext. \_\_\_\_\_

Cell Phone: ( ) Fax: ( )

Email Address: \_\_\_\_\_

Mailing Address preference: ☐ Business Address ☒ Residence

**Minority Identification Code:**

☐ IF (Native-American Female)

☐ IM (Native-American Indian Male)

☐ AF (Asian-American Female)

☐ AM (Asian-American Male)

☒ BF (African-American Female)

☐ BM (African-American Male)

☐ HF (Hispanic-American Female)

☐ HM (Hispanic-American Male)

☐ WF (Caucasian Female)

☐ WM (Caucasian Male)

**Part III: COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

\_\_\_\_\_ Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed  
and photocopied by members of the public.

Revised 6/2007

## Part I:

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Revised 6/2007

## Part I:

☒ At Large Appointment      or      ☐ District Appointment

Seat Requirement: Representative - South Bay EHS

☐ \*Reappointment                      or                      ☐ New Appointment

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Occupation/Affiliation: Office Assistant

Business Name: Street Beat, Inc.

Business Address: 103 N.W. 10th Avenue

City &amp; State: South Bay, FL Zip Code: 33430

Residence Address: 171 N.W. 9th Avenue, Post Office Box 92

City &amp; State South Bay, FL Zip Code: 33493

Home Phone: (561) 993-9916 Business Phone: ( ) ext.

Cell Phone: (561) 983-1899 Fax: ( )

Email Address: \_\_\_\_\_

**Mailing Address preference:** ☐ Business Address ☒ Residence

**Minority Identification Code:**

- |  |   |
|--|---|
| <input type="checkbox"/> IF (Native-American Female)             | <input type="checkbox"/> IM (Native-American Indian Male) |
| <input type="checkbox"/> AF (Asian-American Female)              | <input type="checkbox"/> AM (Asian-American Male)         |
| <input checked="" type="checkbox"/> BF (African-American Female) | <input type="checkbox"/> BM (African-American Male)       |
| <input type="checkbox"/> HF (Hispanic-American Female)           | <input type="checkbox"/> HM (Hispanic-American Male)      |
| <input type="checkbox"/> WF (Caucasian Female)                   | <input type="checkbox"/> WM (Caucasian Male)              |

### Part III: COMMISSIONER COMMENTS

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed and photocopied by members of the public.

Revised 6/2007

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
ADVISORY BOARD NOMINEE INFORMATION FORM**

**Part I:**

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: \_\_\_\_\_ Years. From: 04/01/2008 To: 09/26/2009

Seat Requirement: Alternate - South Bay EHS Seat #: 32-A

☐ \*Reappointment

or

☐ New Appointment

or ☒ to complete the  
term of

Dionne Tolbert

Due  
to:

☐ resignation

☒ other

Completion of term to  
expire on:

09/26/2009

**Part II:** *APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT*

Name: Bolanos, Johnathan  
Last First Middle

Occupation/Affiliation: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City & State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Residence Address: 740 SE 2nd Street

City & State Belle Glade, FL Zip Code: 33430

Home Phone: ( ) Business Phone: ( ) ext. \_\_\_\_\_

Cell Phone: (561) 262-7943 Fax: ( )

Email Address: \_\_\_\_\_

Mailing Address preference: ☐ Business Address ☒ Residence

**Minority Identification Code:**

☐ IF (Native-American Female)

☐ IM (Native-American Indian Male)

☐ AF (Asian-American Female)

☐ AM (Asian-American Male)

☐ BF (African-American Female)

☐ BM (African-American Male)

☐ HF (Hispanic-American Female)

☒ HM (Hispanic-American Male)

☐ WF (Caucasian Female)

☐ WM (Caucasian Male)

**Part III:** **COMMISSIONER COMMENTS**

Appointment to be made at BCC Meeting on: April 1, 2008

**\*When a person is being considered for re-appointment, the number of previous disclosed voting conflicts shall be considered by the Board of County Commissioners.**

\_\_\_\_\_ Number of previously disclosed voting conflicts during the previous term

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pursuant to Florida's Public Records Law, this document may be reviewed  
and photocopied by members of the public.

Revised 6/2007

**A RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA REPEALING AND REPLACING RESOLUTION NO. R2000-1866 REGARDING THE HEAD START/EARLY HEAD START POLICY COUNCIL**

**WHEREAS**, the Board of County Commissioners of Palm Beach County adopted Resolution No. R-92-444 on March 24, 1992, which established the Head Start Policy Council; and

**WHEREAS**, the Head Start Policy Council Resolution No. R-92-444 was repealed and replaced with Resolution No. R2000-1866, dated November 21, 2000 to establish the Head Start/Early Head Start Policy Council to incorporate Early Head Start Program;

**WHEREAS**, the Head Start/Early Head Start Policy Council Resolution No. R2000-1866 needs to be repealed and replaced to accommodate the inclusion of the Head Start/Early Head Start Contracted Programs;

**WHEREAS**, the Federal Government requires all Head Start/Early Head Start grant recipients to establish a Head Start/Early Head Start Policy Council which is comprised of parents of Head Start/Early Head Start children presently enrolled in the program and representatives of the community; and

**WHEREAS**, parent and community involvement is essential to an effective Head Start/Early Head Start program,

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, that:**

**1. Repeal and Replacement**

Resolution No. R2000-1866 is hereby repealed and replaced with the following:

**A. Requirements for Membership**

1. There will be a total of 33 members of the Policy Council. At all times there shall be an odd number of membership positions on the Head Start/Early Head Start Policy Council. In the event of a change in the number of Head Start/Early Head Start centers or programs, that will result in a change in the number of parent members, the number of community representatives will be adjusted accordingly so that an odd number of members is retained to maintain at least a 51% parent membership.

B. **Conditions of Membership**

Residency Requirement

All members must be residents of Palm Beach County at the time of appointment and while serving on the Council.

C. **Prohibition of County Staff**

County employees may not be appointed to the Head Start/Early Head Start Policy Council.

D. **Terms of Appointment**

The term of membership shall be for three (3) years, however each year, Policy Council Members must be voted in by the Policy Council. Vacancies occurring during a term shall be filled for the unexpired term and in the manner described above. In no event may a member serve for more than three years pursuant to federal regulations.

E. **Automatic Removal for Lack of Attendance**

A member of the Head Start/Early Head Start Policy Council shall automatically be removed for lack of attendance. Lack of attendance is defined as failure to attend three (3) consecutive meetings and/or failure to attend more than one-half of the meetings scheduled during a calendar year. Participation for less than three-fourths of a meeting shall constitute lack of attendance. Excused absences due to illness, absence from the County, or personal hardship, if approved by vote of the Head Start/Early Head Start Policy Council, shall not constitute a lack of attendance. Excused absences shall be entered into the minutes at the next regularly scheduled meeting of the Head Start/Early Head Start Policy Council. Members removed under this paragraph shall not continue to serve until a new appointment is made and removal shall create a vacancy.

F. **Elected Office**

Members shall not be prohibited from qualifying as a candidate for elected office.

G. **Travel Reimbursement**

Travel reimbursement is limited to expenses incurred only for travel outside Palm Beach County necessary to fulfill Council member responsibilities when sufficient funds have been budgeted and are available and upon the prior approval of the Board of County Commissioners and is consistent with

Palm Beach County personnel rules and procedures. No other expenses are reimbursable except documented long distance telephone calls to the liaison County department.

H. **Ethics**

Members shall be governed by the applicable provisions of the Palm Beach County Ethics Resolution R-94-693 as may be amended.

I. **Duties of Head Start/Early Head Start Policy Council**

1. Appendix A, attached hereto, outlines the major management functions connected with the Head Start/Early Head Start program at the grantee level and the degree of responsibility assigned to each participating group as dictated by the federal regulations. Pursuant to Appendix A, the Head Start/Early Head Start Policy Council shall have a general responsibility for establishing a method of hearing and resolving community complaints about the Head Start/Early Head Start program. They shall have operating responsibility for conducting self-evaluations of the County's Head Start/Early Head Start program. They must be consulted on the identification of child development needs in the area to be served and on the standards for ensuring that space, equipment and supplies are acquired as needed. They may be consulted on the directive given to Head Start/Early Head Start staff in day to day operations. The Head Start/Early Head Start Policy Council must approve or disapprove of the following:
  2. The goals of the Head Start/Early Head Start Program , as established by the Head Start/Early Head Start Director and the Board of County Commissioners, and the method of meeting said goals within the Department of Health & Human Services (HHS) guidelines;
  3. The determination of the areas in the community in which Head Start/Early Head Start programs operate;
  4. Plans to use all available community resources in Head Start/Early Head Start;
  5. Criteria for selection of children within applicable laws and HHS guidelines;
  6. The determination of what services should be provided to Head Start/Early Head Start from the program;

7. Head Start/Early Head Start personnel policies, including establishment of hiring and firing criteria for Head Start staff, career development plans and employee grievance procedures;
8. Hiring and firing Head Start Director in accordance with Palm Beach County Personnel Policies and Procedures;
9. Hiring and firing of Head Start/Early Head Start staff in accordance with Palm Beach County Personnel Policies and Procedures;
10. Requests for funds and proposed work program prior to submittal to HHS;
11. Major changes in budget and work programs while programs are in operation; and
12. Information submitted to HHS for pre-view in addition to those functions listed in Appendix A

J. The Head Start/Early Head Start Policy Council shall:

1. Serve as a link between public and private organizations and the community;
2. Have the opportunity to initiate suggestions and ideas for program improvements and to receive a report on actions taken by the County with regard to its recommendations;
3. Plan, coordinate and organize county-wide activities for parents with the assistance of staff;
4. Recruit volunteer services from parents, community residents and community organizations, and mobilize community resources to meet identified needs;
5. Distribute Parent Activity funds to policy committees, subject to Board of County Commissioners' approval.
6. Submit an annual report to the Board of County Commissioners
7. Provide advice and recommendations to the Board of County Commissioners on Head Start/Early Head Start Program and work cooperatively with the Board of County Commissioners and County staff in carrying out the program's objectives.

K. **Meetings of Head Start/Early Head Start Policy Council**

The Head Start/Early Head Start Policy Council shall meet not less than once per month. A quorum must be present for the conducting of all business. The presence

of at least one-third (1/3) of the members appointed shall constitute a quorum. All meetings shall be governed by Roberts' Rules of Order.

Reasonable public notice of all meetings shall be provided and all such meetings shall be open to the public at all times. Minutes of all meetings shall be taken and available for public inspection.

L. **Chair and Vice-Chair**

A Chair and Vice-Chair shall be elected by a majority of the Head Start/Early Head Start Policy Council and shall serve for a term of one year.

Duties of the Chair:

1. Call Head Start/Early Head Start Policy Council meetings and set the agenda for same;
2. Preside at Head Start/Early Head Start Policy Council meetings;
3. Establish committees, appoint committee chairs and charge committees with specific tasks;
4. Perform other functions as the Council may assign by rule or order
5. The Chair shall be a voting member of the Head Start/Early Head Start Policy Council.

M. **Duties of Vice-Chair**

The Vice-Chair shall perform the duties of the Chair in the Chair's absence and such other duties as the Chair may assign. If a vacancy occurs in the office of the Chair, the Vice-Chair shall become the chair for the unexpired term. If a vacancy occurs in the office of Vice-Chair, the Council will elect another member to fill the unexpired term of the Vice-Chair.

II. **Effective Date**

This resolution shall become effective upon approval by a majority vote of the Board of County Commissioners, Palm Beach County, Florida.

The foregoing Resolution was offered by Commissioner Aaronson and moved its adoption.

The motion was seconded by Commissioner Greene upon being put to a vote, the vote was as follows:

TONY MASILOTTI	-	Aye
ADDIE L. GREENE	-	Aye
KAREN T. MARCUS	-	Aye
JEFF KOONS	-	Aye
WARREN H. NEWELL	-	Aye
MARY McCARTY	-	Aye
BURT AARONSON	-	Aye

The Chairman thereupon declared the Resolution duly passed and adopted this 12th day of September, 2006.

APPROVED AS TO FORM  
AND LEGAL SUFFICIENCY

PALM BEACH COUNTY, FLORIDA BY  
ITS BOARD OF COUNTY COMMISSIONERS

SHARON R. BOCK, CLERK &  
COMPTROLLER

By: 

Assistant County Attorney

By: 

Deputy Clerk



HEAD START/EARLY HEAD START POLICY COUNCIL  
ADVISORY BOARD MEMBERS

SEAT ID	CURRENT MEMBER	RACE CODE	BUSINESS/ HOME PHONE	REQUIREMENT	APPOINT DATE	RE-APPT DATE	EXPIRE DATE
<b>APPOINTED BY: At Large</b>							
1	Judith Dryer N/A 2770 Foxhall Drive West West Palm Beach, FL 33417	BF	(561) 688-2082	Community Rep.	02/27/2007	/ /	03/27/2010
2	Vice Mayor Retha Lowe City of Lake Worth 7 N. Dixie Highway Lake Worth, FL 33460	WF	(561) 586-1600 ( ) -	Community Rep.	08/15/2006	/ /	09/26/2009
3	James Leger Badiovision fm'sea 1860 Old Okeechobee Road, Suit West Palm Beach, FL 33409	BM	(561) 719-4098	Community Rep.	02/27/2007	/ /	03/27/2010
4	Diane L. Walker PBSO P.O. Box 312 Pahokee, FL 33476	BF	(561) 996-1670 (561) 924-5200	Community Rep.	02/27/2007	/ /	03/27/2010
5	Rosanna N. Zamora Kaiser Group & Associates P.O. Box 802 Belle Glade, FL 33430	BF	(561) 993-1850	Community Rep.	02/27/2007	/ /	03/27/2010
6	Cynthia Smith 944 30th Court West Palm Beach, FL 33407	BF	(561) 844-0457	Community Rep.	08/15/2006	/ /	09/26/2009
7	Maxine Schoolfield N/A P.O. Box 110 Pahokee, FL 33476	BF	(561) 924-7212	Community Rep.	02/27/2007	/ /	03/27/2010
9	Vincent J. Faga 330 N. Ware Drive West Palm Beach, FL 33409	WM	(561) 833-6333 (561) 686-5217	Community Rep.	03/15/2005	/ /	09/30/2007

HEAD START/EARLY HEAD START POLICY COUNCIL  
ADVISORY BOARD MEMBERS

SEAT ID	CURRENT MEMBER	RACE CODE	BUSINESS/ HOME PHONE	REQUIREMENT	APPOINT DATE	RE-APPT DATE	EXPIRE DATE
<b>APPOINTED BY: At Large</b>							
10	Stephanie Taylor 815 W. Boynton Beach Blvd, Apt Boynton Beach, FL 33426	BF	(561) 350-4325	Parent Representative Boynton	02/27/2007	/ /	09/26/2009
10	A Tracy Saunders 7500 San Castle Blvd. Boynton Beach, FL 33462	BF	(561) 214-0127	Parent Representative Boynton	02/27/2007	/ /	09/26/2009
10	B Yves Oscar 10154 Boynton Place Circle Boynton Beach, FL 33437	BM	(561) 732-6964	Parent Representative Boynton	02/27/2007	/ /	09/26/2009
11	Cristina Martinez 1101 Military Trail, Apt. 147 Jupiter, FL 33458	WF	(561) 346-2503	Parent Representative Jupiter	02/27/2007	/ /	09/26/2009
11	A Dina Albizures 125 - 7th Street Jupiter, FL 33458	HF	(561) 281-6279	Parent Representative Jupiter	02/27/2007	/ /	09/26/2009
11	B Benett Barrios 17965 Thelma Avenue, Apt. G Jupiter, FL 33458	HF	(561) 262-8414	Parent Representative Jupiter	02/27/2007	/ /	09/26/2009
12	Nancy Ramos 950 Old U.S. Highway 27, N/B 1 South Bay, FL 33493	HF	(561) 261-3912	Parent Representative South Bay	02/27/2007	/ /	09/26/2009
12	A Albert Dowdell 781 N.E. 1st Street Belle Glade, FL 33430	BM	(561) 985-3081 (561) 996-9617	South Bay Early Head Start	02/27/2007	/ /	09/26/2009
13	Yolanda Warren 11 Roosevelt Street Belle Glade, FL 33430	BF	(561) 985-1961 (561) 993-0339	Parent Representative Palm Glades	02/27/2007	/ /	09/26/2009
14	Nadleen Seraphin 3091 Ocean Parkway Boynton Beach, FL 33435	BF	(561) 860-2630	Parent Representative Delray Beach	02/27/2007	/ /	09/26/2009

03/20/2008  
(specbrd3)

HEAD START/EARLY HEAD START POLICY COUNCIL  
ADVISORY BOARD MEMBERS

Page 3

SEAT ID	CURRENT MEMBER	RACE CODE	BUSINESS/ HOME PHONE	REQUIREMENT	APPOINT DATE	RE-APPT DATE	EXPIRE DATE
<b>APPOINTED BY: At Large</b>							
14	A Gloria Bostwick 809 S.W. 10th Avenue Delray Beach, FL 33444	BF	(561) 255-2597 (561) 577-9770	Parent Representative Delray Beach	02/27/2007	/ /	09/26/2009
15	Sirleana Noble 1583 Singletary Avenue Pahokee, FL 33476	BF	(561) 924-6990	Parent Representative Pahokee	02/27/2007	/ /	09/26/2009
15	A Tina Vann 38592 - 4th Stree Canal Point, FL 33438	WF	(561) 261-5883	Parent Representative Pahokee	02/27/2007	/ /	09/26/2009
15	B Orde Brown 690 Waddell Way Pahokee, FL 33476	BF	(561) 924-3550	Parent Representative Pahokee	02/27/2007	/ /	09/26/2009
16	Clairasena Myrick 2326 Schall Circle Wet Palm Beach, FL 33417	BF	(561) 688-5757 (561) 586-1108	Parent Representative Westgate	02/27/2007	/ /	09/26/2009
16	A Blondsha Harris 4357 Melaleuca Trail West Palm Beach, FL 33406	BF	(561) 963-3537	Parent Representative Westgate	02/27/2007	/ /	09/26/2009
17	Andrea Poitier 1691 No. Seacrest Blvd. Boynton Beach, FL 33435	BF	(561) 856-8801	Parent Representative Lake Worth	02/27/2007	/ /	09/26/2009
17	A Nakia Harp 6472 Seminole Circle Lantana, FL 33462	BF	(561) 649-4296	Parent Representative Lake Worth	02/27/2007	/ /	09/26/2009
18	Kenneth Higgins 1690 W. 16th St. Riviera Beach, FL 33404	BM	(561) 881-4563	Parent Representative Riviera Beach	12/21/2004	02/27/2007	09/26/2007
18	A Tenisha Easter P.O. Box 10093 Riviera Beach, FL 33419	BF	(561) 584-1530	Parent Representative Riviera Beach	02/27/2007	/ /	09/26/2009

03/20/2008  
(specbrd3)

HEAD START/EARLY HEAD START POLICY COUNCIL  
ADVISORY BOARD MEMBERS

Page 4

SEAT ID	CURRENT MEMBER	RACE CODE	BUSINESS/ HOME PHONE	REQUIREMENT	APPOINT DATE	RE-APPT DATE	EXPIRE DATE
APPOINTED BY: At Large							
18	B James Mims, Sr. 3508 Avenue "S" Riviera Beach, FL 33404	BM	(561) 667-0208	Parent Representative Riviera Beach	02/27/2007	/ /	09/26/2009
19	Sharon Watson-Grant 1009 Imperial Lake Road West Palm Beach, FL 33413	BF	(561) 236-5160	Parent Representative W. Palm	02/27/2007	/ /	09/26/2009
19	A Katherine King 5540 No. Haverhill Rd., Apt #9 West Palm Beach, FL 33401	BF	(561) 640-0229	Parent Representative W. Palm	02/27/2007	/ /	09/26/2009
20	Jovonne White 4829 Bimini Circle West Palm Beach, FL 33407	BF	(561) 574-4652 (561) 471-0091	Parent Rep. Union Baptist Head	02/27/2007	/ /	09/26/2009
20	A Annamaria Persad-Ali 719 - 49th Street West Palm Beach, FL 33407	HF	(561) 502-1493 (561) 854-8585	Parent Rep. Union Baptist Head	02/27/2007	/ /	09/26/2009
21	Danielle Clay 234 N.W. 7th Avenue Delray Beach, FL 33444	BF	(561) 577-5375	Early Head Start/Delray Beach	02/27/2007	/ /	09/26/2009
21	A James Stewart 630 S.W. 6th Avenue Delray Beach, FL 33444	BM	(561) 272-2352	Early Head Start/Delray Beach	02/27/2007	/ /	09/26/2009
22	Lesley Ann Henry 225 Laken Drive West Palm Beach, FL 33407	BF	(561) 282-8315 (561) 881-8165	Parent Representative Easter Seals	02/27/2007	/ /	09/26/2009
22	A Marshella King 906 - 2nd Street, Apt. #7 West Palm Beach, FL 33401	BF	(561) 502-6850	Parent Representative Easter Seals	02/27/2007	/ /	09/26/2009
23	Venita Mills 1412 Palm Glades Drive Belle Glade, FL 33430	BF	(561) 996-6923 (561) 261-0437	Family Child Care Home	02/27/2007	/ /	09/26/2009

03/20/2008  
(specbrd3)

HEAD START/EARLY HEAD START POLICY COUNCIL  
ADVISORY BOARD MEMBERS

Page 5

SEAT ID	CURRENT MEMBER	RACE CODE	BUSINESS/ HOME PHONE	REQUIREMENT	APPOINT DATE	RE-APPT DATE	EXPIRE DATE
<b>APPOINTED BY: At Large</b>							
23	A Vacant  FL	UN	( ) ( )	Family Child Care Home	//	//	09/26/2009
24	Vacant  FL	UN	( ) ( )	Home-Based Early Head Start	//	//	//
24	A Vacant  FL	UN	( ) ( )	Home-Based Early Head Start	//	//	//
25	Michael Paul Smith 604 - 21st Street, Apt. #C West Palm Beach, FL 33407	BM	(561) 623-3975	Apostolic CAGE	02/27/2007	//	09/26/2009
25	A Chris Lamber 850 Martin Luther King Jr. Blv Riviera Beach, FL 33404	BM	(561) 201-5058	Apostolic CAGE	02/27/2007	//	09/26/2009
25	B Cicely Hines 1004 Palm Beach Lakes Blvd. West Palm Beach, FL 33401	BF	(561) 294-6271	Apostolic CAGE	02/27/2007	//	09/26/2009
26	Tracy Davis 100 Wedgewood Plaza, Apt. #113 Riviera Beach, FL 33404	BF	(561) 640-0576	Apostolic Child Development Center	02/27/2007	//	09/26/2009
27	Marie Jose Padovany 802 S. Broughton Circle Boynton Beach, FL 33436	BF	(561) 503-8346	A Step Above	02/27/2007	//	09/26/2009
27	A Danielle S. Herbert 1211 Meadows Circle Boynton Beach, FL 33436	BF	(561) 214-0127	A Step Above	02/27/2007	//	09/26/2009
28	Charlene Alonso 1089 Drexel Road West Palm Beach, FL 33417	BF	(561) 686-7683	Emmanuel Child Development	02/27/2007	//	09/26/2009

HEAD START/EARLY HEAD START POLICY COUNCIL  
ADVISORY BOARD MEMBERS

SEAT ID	CURRENT MEMBER	RACE CODE	BUSINESS/ HOME PHONE	REQUIREMENT	APPOINT DATE	RE-APPT DATE	EXPIRE DATE
APPOINTED BY: At Large							
29	Crystal Dalrymple 5111 Caribbean Blvd, Apt. #214 West Palm Beach, FL 33407	BF	(561) 848-1069 (561) 315-3497	Kings Kids	02/27/2007	/ /	09/26/2009
30	Kerline Salomon 1301 Madison Chase, Apt. 5 Royal Palm Beach, FL 33411	BF	(561) 667-7304	My First Steps	02/27/2007	/ /	09/26/2009
30	A Carmen Torres 628 Fairfax West Palm Beach, FL 33405	HF	(561) 804-9120	My First Steps	02/27/2007	/ /	09/26/2009
31	Juliet Murdock 3 Corrie Place Boynton Beach, FL 33426	BF	(561) 439-6715	San Castle Early Head Start	02/27/2007	/ /	09/26/2008
31	A Eida Molina 1112 South Ridge Road Lantana, FL 33462	HF	(561) 201-1427	San Castle Early Head Start	02/27/2007	/ /	09/26/2009
32	Nedia Ramos 990 U.S. 27th North Lot B-3 South Bay, FL 33493	HF	(561) 261-3919	South Bay Early Head Start	02/27/2007	/ /	09/26/2009
32	A Dionne Tolbert 145 N.W. 16th Street Belle Glade, FL 33430	BF	(561) 261-4047 (561) 993-9309	South Bay Early Head Start	02/27/2007	/ /	09/26/2009
33	Vacant  , FL	UN	( ) ( )	No special requirement	/ /	/ /	/ /