

Agenda Item #:

6C.4

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
BOARD APPOINTMENT SUMMARY

Meeting Date: November 16, 2010

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 Community Representatives to the Head Start/Early Head Start Policy Council for terms of three (3) years effective November 16, 2010.

<u>Seat ID #</u>	<u>Community Representative</u>	<u>Term Expire</u>	<u>Nominated by:</u>
1	Karen Louise Hill-Simpson	11/15/13	Comm. Marcus/Taylor
2	Mickale Linton	11/15/13	Comm. Marcus/Taylor
3	Tamara Labre Starks	11/15/13	Comm. Marcus/Taylor
4	Marie Chantale Saget	11/15/13	Comm. Marcus/Taylor

Summary: The term of appointment for Policy Council representatives and alternates to the Head Start/Early Head Start (HS/EHS) Policy Council is three 3 years. The community representatives must represent major public or private agencies, community civic or professional organizations, or parents of former Head Start children. The Council is comprised of 33 members, of which 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 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 Number 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. Including the above nominees, parent members (not listed), and alternates, the council's racial makeup consists of 5 Black males, 30 Black females, 3 White females and 3 Hispanic females.

Attachments:

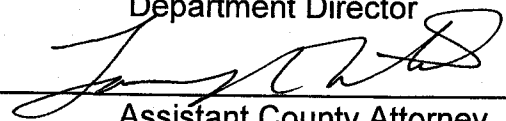
1. Head Start/Early Head Start Policy Council Resolution Number R-2006-1878
2. Board Appointment Information Forms with Acknowledgement Form
3. Head Start/Early Head Start Policy Council Current Board Member Listing

Recommended by:


Department Director

11/9/10
Date

Approved by:


Assistant County Attorney

11/10/10
Date

II. REVIEW COMMENTS

A. Other Department Review:

Department Director

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

RESOLUTION R-2006-1878

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

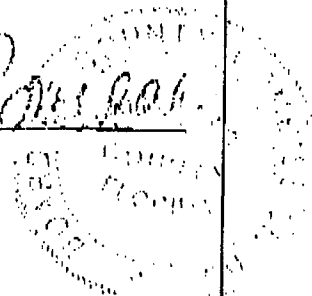
SHARON R. BOCK, CLERK &
COMPTROLLER

By: 

Assistant County Attorney

By: 

Deputy Clerk



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

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Part I (to be filled out by Department): (Please Print)

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: _____ Years. From: 11/16/2010 To: 11/15/2013

Seat Requirement: Community Representative Seat #: 1

☐ *Reappointment

or

☒ New Appointment

or ☐ to complete the term of

Judith Dryer

Due to:

☐ resignation ☒ other Term expired

Completion of term to expire on:

3/27/2010

***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 _____

Part II (to be filled out and signed by Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: HILL-SIMPSON KAREN LOUISE
Last First Middle

Occupation/Affiliation: Law Librarian

Business Name: Palm Beach County Sheriff's Office

Business Address: 3228 Gun Club Road

City & State: West Palm Beach Zip Code: _____

Residence Address: 1306 N. Mangonia Drive

City & State: West Palm Beach Zip Code: 33401

Home Phone: (609) 655 2958 Business Phone: (561) 688 4742 Ext.

Cell Phone: (609) 236 9896 Fax: ()

Email Address: hillkars@yahoo.com

Mailing Address preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes _____ No ☒

If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code:

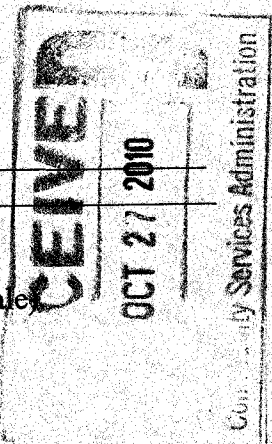
- | | |
|--|---|
| <input type="checkbox"/> IF (Native-American Female) | <input type="checkbox"/> IM (Native-American Indian Male) |
| <input type="checkbox"/> AF (Asian-American Female) | <input type="checkbox"/> AM (Asian-American Male) |
| <input checked="" type="checkbox"/> BF (African-American 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) |

Applicant's Signature: [Signature] Date: 10/4/10

Part III (to be filled out by Commissioner):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: Andy L DeJulippo for Comm. Karen T. Marcus Date: 10/25/10





TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: PALM BEACH COUNTY CODE OF ETHICS

Effective May 1, 2010, contractual relationships between Palm Beach County government and advisory board members, their employers, or businesses, are prohibited conflicts of interest as set forth in the Palm Beach County Code of Ethics, Ordinance 2009-051. This conflict of interest must be waived by an affirmative vote of five (5) members of the Board of County Commissioners upon full disclosure at a public meeting in order to accept appointment to an advisory board. In the space provided below, please identify any such contractual relationships, or verify that none exist at this time. The Ordinance (2009-051) and the training requirement can be found on the web at: <http://www.pbcgov.com/ethics/advisory.htm>

<u>Type of Contract</u>	<u>Which Department/Division</u>	<u>Effective Date</u>	<u>Term</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____ Yes, submit a waiver to the Board of County Commissioners, since I or my employer have/has the above named contract(s);

OR

☒ At this time, I nor my employer have contract(s) with the Board of County Commissioners

As a (current or potential) advisory board member you are required to receive training on the PBC Code of Ethics and acknowledge that you have read and understand the PBC Code of Ethics Ordinance.

If you are unable access the training and/or Ordinance on the web, please contact {Insert Liaison Name Here} at {Insert Telephone Number Here} for other arrangements.

Acknowledgment of Receipt

NAME: KAREN L. HILL-SIMPSON
Print or Type

FIRM/COMPANY/ORGANIZATION: Palm Beach County HS of EHS

ADVISORY BOARD(S): Policy Council

I acknowledge that I have taken the required training; and read and understand the Palm Beach County Code of Ethics Ordinance, the provisions of which are effective May 1, 2010. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: K. Hill-Simpson Date: 10/4/10

Please sign and return this FORM to {Insert Liaison Name Here} {Insert Address Here}. A self-addressed envelope has been provided for your convenience.

TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: STATE GUIDE TO THE SUNSHINE AMENDMENT &
CODE OF ETHICS

As an appointee to a Palm Beach County Advisory Board, you must familiarize yourself with the State Guide to the Sunshine Amendment and Code of Ethics. The purpose of this guide is to ensure adherence to the highest standards of ethics, protect the integrity of County government and foster public confidence.

This guide addresses conflict of interest, disclosure, acceptance and reporting of gifts, use of position or property, voting conflicts, political activities, prohibition against misuse of the code, and enforcement. This Guide also addresses conflicts, prohibitions on doing business with the County or having conflicting employment or contractual relationships. The Guide can be found on the web at: <http://www.pbcgov.com/ethics/advisory.htm>

Please read and make yourself familiar with the Guide and return the acknowledgment form below to: (Insert Liaison Name) (Insert Liaison Address). If you cannot access this document on the web, please contact (Insert Liaison Name) at (Insert Liaison Telephone #) for other arrangements.

Acknowledgment of Receipt

NAME: KAREN L. HILL-SIMPSON
Print or Type

ADVISORY BOARD(S): Policy Council

I acknowledge that I have read the State of Florida Guide to the Sunshine Amendment and the Code of Ethics. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: Karen L. Hill-Simpson Date: 10/4/10

Please sign and return to Administration in self-addressed envelope provided.

Revised 3/15/10

1306 N. Mangonia Drive
West Palm Beach, FL 33401
Phone: 561 236 9896
E-Mail: hillkars@yahoo.com

KAREN HILL-SIMPSON

Education	2008	South University	West Palm Beach, FL
	Bachelor of Science in Legal Studies		
	2002	New England Institute of Technology	West Palm Beach, FL
	Associate Degree in Business Administration with Microsoft Certification in PowerPoint and Excel		
	1997	North Technical Education Center	Riviera Beach, FL
	State Certification as a Nursing Assistant and Home Health Aide		
Experience	2007-2008	Legal Aid Society of Palm Beach County, Inc.	West Palm Beach, FL
	Paralegal, Pro-Bono Project		
	Filed, conducted intake on new clients, scheduled appointments, prepared documents and correspondence, entered data into a case management system to update attorneys and clients information, referred cases to attorneys and assisted with appeals and medical records for the Social Security Administration.		
	2006	Legal Aid Society of Palm Beach County, Inc.	West Palm Beach, FL
	University Externship, Pro Bono Project		
	Filed, referred attorneys, screened clients and scheduled appointments.		
	2001-2002	New England Institute of Technology	West Palm Beach, FL
	Work Study Student, Technical Enrichment Center		
	Typed, tutored, and assisted in the center's daily operation.		
	1998-Present	Various Nursing Employment Agencies	Palm Beach County
	These include: Boca Nursing Services, United Nursing Services, Whitsyms Nursing Registry, Private Care, Inc., and Kramer Senior Services.		
	Patients' personal care, maintained patients safety and well being.		
	1997-1998	SEARS Department Store-Palm Beach Mall	West Palm Beach, FL
	Performed customer service and sales duties in the Ladies Department		
	Gold Star for punctuality-second quarter and Top rapid credit associate-fourth quarter.		
	1986-1996	Department of Correctional Services	Kingston, Jamaica
	Clerical Officer-Personnel Unit and Accounting Clerk-Accounting Unit		
	Personnel Unit: Reviewed job applications, updated service records, checked attendance registers, updated leave cards, etc. Accounting Unit: Wrote, recorded and issued checks, recorded all disbursements, prepared and made deposits, and balanced all accounts.		
Skills	Microsoft Office Suite, Westlaw, Findlaw, Kemps, legal research, drafting complaints, contracts, motions, summons, wills, subpoenas and interrogatories.		
References	Provided upon request		

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☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: _____ Years. From: 11/16/2010 To: 11/15/2013

Seat Requirement: Community Representative Seat #: 2

☐ *Reappointment

or

☒ New Appointment

or ☐ to complete the
term of _____

Due ☐ resignation ☐ other
to: _____

Completion of term to
expire on: _____

***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 _____

Part II (to be filled out and signed by Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: LINTON MICKALE
Last First Middle

Occupation/Affiliation: PROFESSOR

Business Name: LEGAL AID SOCIETY OF P.B.C.

Business Address: 423 FURN STREET STE 200

City & State: W.P.B. FL Zip Code: 33401

Residence Address: 7117 HAWK NORT TERRACE

City & State: W.P.B. FL Zip Code: 33402

Home Phone: () Business Phone: (561) 932-9713 Ext.

Cell Phone: (561) 202-5293 Fax: ()

Email Address: MICKALE.LINTON@COMCAST.NET

Mailing Address preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes _____ No ☒

If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code:

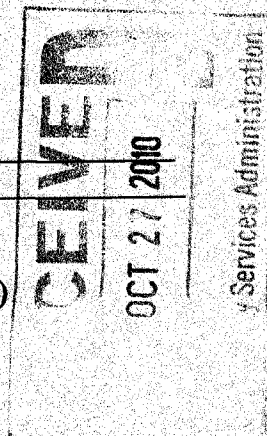
- | | |
|--|--|
| <input type="checkbox"/> IF (Native-American Female) | <input type="checkbox"/> IM (Native-American Indian Male) |
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| <input type="checkbox"/> BF (African-American Female) | <input checked="" type="checkbox"/> BM (African-American 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) |

Applicant's Signature: Mickale Linton Date: 10/15/10

Part III (to be filled out by Commissioner):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: Cindy L. DeFilippo for Karen T. Marcus Date: 10/25/10





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FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

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<u>Type of Contract</u>	<u>Which Department/Division</u>	<u>Effective Date</u>	<u>Term</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____ Yes, submit a wavier to the Board of County Commissioners, since I or my employer have/has the above named contract(s);

OR

_____ At this time, I nor my employer have contract(s) with the Board of County Commissioners

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Acknowledgment of Receipt

NAME: McKALE LINTON
Print or Type

FIRM/COMPANY/ORGANIZATION: N/A

ADVISORY BOARD(S): HEAD START / EARLY HEADSTART

I acknowledge that I have taken the required training; and read and understand the Palm Beach County Code of Ethics Ordinance, the provisions of which are effective May 1, 2010. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: McKale Linton Date: 10/5/10

Please sign and return this FORM to {Insert Liaison Name Here} {Insert Address Here}. A self-addressed envelope has been provided for your convenience.

TO: ADVISORY BOARD MEMBERS

**FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR**

**RE: STATE GUIDE TO THE SUNSHINE AMENDMENT &
CODE OF ETHICS**

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Please read and make yourself familiar with the Guide and return the acknowledgment form below to: (Insert Liaison Name) (Insert Liaison Address). If you cannot access this document on the web, please contact (Insert Liaison Name) at (Insert Liaison Telephone #) for other arrangements.

Acknowledgment of Receipt

NAME: MICHAEL LINTON
Print or Type

ADVISORY BOARD(S): HEAD START / EARLY HEAD START

I acknowledge that I have read the State of Florida Guide to the Sunshine Amendment and the Code of Ethics. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: Michael Linton Date: 6/8/10

Please sign and return to Administration in self-addressed envelope provided.

Revised 3/15/10

Mickale L. Linton, FRP, M.Ed.
Florida Registered Paralegal
7117 Hawks Nest Terrace, West Palm Beach, FL 33407
Email: mickalelinton@comcast.net
Telephone: (561) 202-5293

QUALIFICATION SUMMARY:

- Articulate and effective communicator with proven ability to work with diverse populations of people.
- Entrepreneur skills with strong planning, organizing, and leadership.
- Exceptional performance history in identifying and resolving complex administrative problems; resourceful in developing and implementing creative solutions resulting in increased productivity with enhanced sensitivity to cost and efficiency.

EDUCATION:

- **M.S. Education**
Lynn University, Boca Raton, FL 2006
- **B.S. Legal Studies, *Magna Cum Laude***
South University, (*ABA Approved*) West Palm Beach, FL December 2004

PROFESSIONAL TRAINING AND CERTIFICATIONS:

- **County Court Mediator**
Mediator # 20034C
Three day program that provided an understanding of mediation in theory, concept and practical application. The program also provided important conflict resolution skills necessary to mediate in all professional fields.
- **The Grant Institute, University of Miami**
Certified Grant Writer
Three day workshop that consists of program planning, professional grant writing and grant research.

PROFESSIONAL EXPERIENCE:

Paralegal, Legal Aid Society of Palm Beach County, Inc., West Palm Beach, FL
02/2004 - Present

- Performed all phases of juvenile dependency law from initial protective intake through termination of parental rights proceedings/litigation and subsequent adoption.
- Experienced working with emotionally and physically challenged children and adolescents.
- Experienced working with at risk adolescents. Targeting educational and independent living goals.
- Coordinated and calendar mediation, hearings, depositions and trial dates.
- Transcribed pleadings, memorandum of laws and correspondences.
- Provided exceptional litigation support through researching case law and managing and meeting discovery deadlines.
- Proficient in Microsoft Office, Outlook, FrontPage and PowerPoint and Web Sites.
- Proficient in legal research, using legal databases such as West Law, Lexis Nexis and findlaw.

Legal Assistant/Collections Assistant, Gelfand & Arpe, P.A., West Palm Beach, FL 07/2002 - 03/2004

- Performed all phases of the Condominium Homeowners Association collections and foreclosures.
- Calendared all demand deadlines and performed ATIDS search.
- Prepared and reviewed memoranda, case brief, pleadings and subpoenas.
- Managed input of billable time.

Customer Service Manager/Paralegal, Robert Bates Construction Company, West Palm Beach, FL 06/2000 - 07/2002

- Reviewed files, assisted and managed outside counsel with litigation.
- Gathered and organized documents for trial, hearings and depositions.
- Coordinated and calendared mediation, hearings, depositions and trial dates.
- Coordinated expansion opportunities on accounts and provided support during renewals and legal review and provisions in contracts and maintaining database.
- Provided legal review of marketing and collateral matters.
- Prepared and filed non-disclosure agreements.
- Prepared and negotiated complex contract agreements.
- Performed survey research, data analysis and evaluations.
- Demonstrated experiences in marketing, sales, purchasing and advertising.

Lead Passenger Service Agent, American Airlines, West Palm Beach, FL 09/1998 - 06/2000

- Provided superior customer service to passengers.
- Applied Knowledge of critical issues facing Federal Aviation operations.
- Assisted passenger service agents during training.

AWARDS:

- 2002 Alpha Lambda Delta, Honor Society (ALD)
- 2003 Community Service Award, South University
- 2004 Lambda Epsilon Chi (LEX)
- 2004 Outstanding Legal Studies Student, South University

COMMITTEE ASSIGNMENTS:

- 2003 -2004 President, South University Pro Bono Paralegal Association
- 2003-2004 Chairperson, South University Student Banquet
- 2004-Present Paralegal Advisory Board Member, South University
- 2005 Second Vice President, Paralegal Association of Florida, Palm Beach County Chapter
- 2006-Present Director, South University Legal Studies Alumni Club

REFERENCES:

- Doris Rachles, Esquire
Director and Chairperson Legal Studies, South University
561-697-9200
- Maxine Williams, Esquire
Magistrate, Palm Beach County, 15th Judicial Circuit
561-355-1994
- Damia Gordon, Esquire
Senior Attorney, Florida Department of Children and Families
561-837-5525

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

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Part I (to be filled out by Department): (Please Print)

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: _____ Years. From: 11/16/2010 To: 11/15/2013

Seat Requirement: Community Representative Seat #: 3

☐ *Reappointment

or

☒ New Appointment

or ☐ to complete the
term of

James Leger

Due
to:

☐ resignation

☒ other
expired term

Completion of term to
expire on:

3/27/2010

***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

Part II (to be filled out and signed by Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Starks Tamara LaBre
Last First Middle

Occupation/Affiliation: Unit Manager

Business Name: Palm Beach County Sheriff's Office

Business Address: 3228 Gun Club Road

City & State: West Palm Beach Zip Code: 33406

Residence Address: 161 South Flame Avenue

City & State: Pahokee, FL Zip Code: 33476

Home Phone: (561) 924-7302 Business Phone: (561) 688-9447 Ext. _____

Cell Phone: (561) 291-5634 Fax: ()

Email Address: TAMASTAR5@AOL.COM

Mailing Address preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes _____ No ☒

If Yes, state the court, nature of offense, disposition of case and date: _____

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)

Applicant's Signature: _____ Date: 10/5/10

Part III (to be filled out by Commissioner):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: Andy L DeFilippo for Date: 10/25/10

Comm. Karen T. Marcus



TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: PALM BEACH COUNTY CODE OF ETHICS

Effective May 1, 2010, contractual relationships between Palm Beach County government and advisory board members, their employers, or businesses, are prohibited conflicts of interest as set forth in the Palm Beach County Code of Ethics, Ordinance 2009-051. This conflict of interest must be waived by an affirmative vote of five (5) members of the Board of County Commissioners upon full disclosure at a public meeting in order to accept appointment to an advisory board. In the space provided below, please identify any such contractual relationships, or verify that none exist at this time. The Ordinance (2009-051) and the training requirement can be found on the web at: <http://www.pbcgov.com/ethics/advisory.htm>

<u>Type of Contract</u>	<u>Which Department/Division</u>	<u>Effective Date</u>	<u>Term</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____ Yes, submit a waiver to the Board of County Commissioners, since I or my employer have/has the above named contract(s);

OR

☒ At this time, I nor my employer have contract(s) with the Board of County Commissioners

As a (current or potential) advisory board member you are required to receive training on the PBC Code of Ethics and acknowledge that you have read and understand the PBC Code of Ethics Ordinance.

If you are unable access the training and/or Ordinance on the web, please contact {Insert Liaison Name Here} at {Insert Telephone Number Here} for other arrangements.

Acknowledgment of Receipt

NAME: Tamara Starks
Print or Type

FIRM/COMPANY/ORGANIZATION: Palm Beach County Head Start & EHS

ADVISORY BOARD(S): Policy Council

I acknowledge that I have taken the required training; and read and understand the Palm Beach County Code of Ethics Ordinance, the provisions of which are effective May 1, 2010. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: [Signature] Date: 10/5/10

Please sign and return this FORM to {Insert Liaison Name Here} {Insert Address Here}. A self-addressed envelope has been provided for your convenience.

TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: STATE GUIDE TO THE SUNSHINE AMENDMENT &
CODE OF ETHICS

As an appointee to a Palm Beach County Advisory Board, you must familiarize yourself with the State Guide to the Sunshine Amendment and Code of Ethics. The purpose of this guide is to ensure adherence to the highest standards of ethics, protect the integrity of County government and foster public confidence.

This guide addresses conflict of interest, disclosure, acceptance and reporting of gifts, use of position or property, voting conflicts, political activities, prohibition against misuse of the code, and enforcement. This Guide also addresses conflicts, prohibitions on doing business with the County or having conflicting employment or contractual relationships. The Guide can be found on the web at: <http://www.pbcgov.com/ethics/advisory.htm>

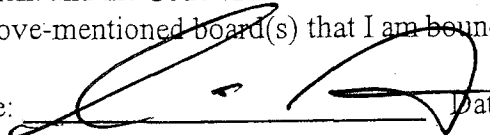
Please read and make yourself familiar with the Guide and return the acknowledgment form below to: (Insert Liaison Name) (Insert Liaison Address). If you cannot access this document on the web, please contact (Insert Liaison Name) at (Insert Liaison Telephone #) for other arrangements.

Acknowledgment of Receipt

NAME: Tamara Starks
Print or Type

ADVISORY BOARD(S): Policy Council

I acknowledge that I have read the State of Florida Guide to the Sunshine Amendment and the Code of Ethics. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature:  Date: 10/5/10

Please sign and return to Administration in self-addressed envelope provided.
Revised 3/15/10

TAMARA STARKS

161 South Flame Avenue, Pahokee Florida 33476
(Cell) 561-291-5636 (Home) 561-924-7302
Email: tamastar5@aol.com

EDUCATION:

Nova Southeastern University 2005-2007
Masters in Public Administration
Fort Lauderdale, Florida

Florida Coastal School of Law 2000-2003
Juris Doctorate
Admitted to the Florida Bar in 2003
Jacksonville, Florida

University of Florida 1997-2000
Bachelors in Business Administration
Minor in Education
Gainesville, Florida

EXPERIENCE:

Palm Beach County Sheriffs' Office 3228 Gun Club Road, West Palm Beach, Florida
(April, 2010-present)

Unit Manager (Re-Entry Program): Responsible for the daily operational, administrative, site and professional duties of Corrections Support Services which may include re-entry programs and the law library.

Duties: Manages, coordinates, monitors and evaluates existing inmate programs at three detention facilities especially as it relates to re-entry. Supervises, directs and evaluates assigned staff, addresses employee concerns and problems; direct work, counsels, disciplines and completes employee performance appraisals. Assists with identification, initiation and implementation of new inmate programs.

Department of Children and Families 2990 North Main Street, Belle Glade, Florida
(2007-April, 2010)

Department of Children and Families 1690 N.W. 9th Avenue, Okeechobee, FL
(2005-2007)

Senior Attorney: Representing the Department of Children and Families in legal proceedings involving dependency cases which require parents to complete numerous social services such as Psychological and Psychiatric Evaluations, Substance Abuse Assessments, Residential and Outpatient Treatment; Parenting Classes, Individual and Family Counseling ,etc.

Duties: researching applicable law; communicating with client; giving legal advice; drafting motions; preparing memorandums of law; conducting non-jury trials; accessing liability; advising clients of legal ramifications that may arise and possible legal ramifications; instructing clients of departmental policies and procedures; keeping

informed of current state and federal laws affecting dependency proceedings, public speaking; participating in settlement conferences with opposing counsel and parents; data entry; observing receiving and otherwise obtaining information from all relevant sources; communicating with persons outside of the organization, representing the organization to the public, government, and other external sources; combining , evaluating and reasoning with information and data to make decisions and solve problem; knowledge of laws, legal codes, court procedures, precedents, government regulations, executive orders, agency rules; reviewing NCIC/FCIC and PALMS checks; inputting information in AG system along with FSFN; recommends services for parents' to complete.

19th Judicial Circuit Office of the Public Defender Fort Pierce, Florida (2003-2005)
Assistant Public Defender: Previously worked as a Public Defender in St. Lucie, Martin, Okeechobee, and Indian River County Representing Indigent clients in criminal proceedings in which they are the accused.

Duties : conducting client visits within a penal setting; drafting motion memorandums of law; conducting bond hearings; conducting criminal trials in Juvenile, Misdemeanor and Felony Courts; conducting jury and non-jury trials; participating in attorney client conferences; negotiations with State Attorney; conducting legal research; communicating with clients from a diverse population; visiting correctional facilities throughout the 19th Circuit; communicating with personnel from various Sheriff's offices; communicating with court personnel; advising clients regarding legal matters; investigate and complies documentation for clients defense; keeps informed of state and federal law regarding criminal law; drafts motion; public speaking.

US States Attorneys Office Middle District of Florida Jacksonville, Florida
(Summer 2002)

Law Clerk: Assisting attorneys with legal questions, work and research.

Duties include: Drafting memorandums of law, research, assisting the attorney in trial preparation

References available upon request

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

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Part I (to be filled out by Department): (Please Print)

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: _____ Years. From: 11/16/2010 To: 11/15/2013

Seat Requirement: Community Representative Seat #: 4

☐ *Reappointment

or

☒ New Appointment

or ☐ to complete the
term of _____

Due ☐ resignation ☐ other
to: _____

Completion of term to
expire on: _____

***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 _____

Part II (to be filled out and signed by Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: Saget Marie Chantale
Last First Middle

Occupation/Affiliation: OFFICE MANAGER

Business Name: C&F Multi SERVICES (VNM)

Business Address: 2310 SE, 2nd ST. 5103

City & State: BOYNTON BEACH Zip Code: FL 33445

Residence Address: 5290 NW 6th COURT

City & State: DELRAY BEACH Zip Code: FL 33445

Home Phone: (561) 637-6159 Business Phone: (561) 424-0412 Ext.

Cell Phone: (561) 929-5729 Fax: ()

Email Address: ctaloue@yahoo.com

Mailing Address preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes _____ No ☒

If Yes, state the court, nature of offense, disposition of case and date: _____

Minority Identification Code:

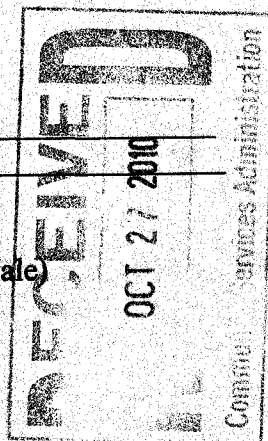
- | | |
|--|---|
| <input type="checkbox"/> IF (Native-American Female) | <input type="checkbox"/> IM (Native-American Indian Male) |
| <input type="checkbox"/> AF (Asian-American Female) | <input type="checkbox"/> AM (Asian-American Male) |
| <input checked="" type="checkbox"/> BF (African-American 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) |

Applicant's Signature: [Signature] Date: 10/07/10

Part III (to be filled out by Commissioner):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: Cindy R De Filippo for Date: 10/25/10
Comm. Karen T. Marcus





TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: PALM BEACH COUNTY CODE OF ETHICS

Effective May 1, 2010, contractual relationships between Palm Beach County government and advisory board members, their employers, or businesses, are prohibited conflicts of interest as set forth in the Palm Beach County Code of Ethics, Ordinance 2009-051. This conflict of interest must be waived by an affirmative vote of five (5) members of the Board of County Commissioners upon full disclosure at a public meeting in order to accept appointment to an advisory board. In the space provided below, please identify any such contractual relationships, or verify that none exist at this time. The Ordinance (2009-051) and the training requirement can be found on the web at: <http://www.pbcgov.com/ethics/advisory.htm>

<u>Type of Contract</u>	<u>Which Department/Division</u>	<u>Effective Date</u>	<u>Term</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____ Yes, submit a waiver to the Board of County Commissioners, since I or my employer have/has the above named contract(s);

OR

☒ At this time, I nor my employer have contract(s) with the Board of County Commissioners

As a (current or potential) advisory board member you are required to receive training on the PBC Code of Ethics and acknowledge that you have read and understand the PBC Code of Ethics Ordinance.

If you are unable access the training and/or Ordinance on the web, please contact {Insert Liaison Name Here} at {Insert Telephone Number Here} for other arrangements.

Acknowledgment of Receipt

NAME: Marie Chantale Saget
Print or Type

FIRM/COMPANY/ORGANIZATION: N/A

ADVISORY BOARD(S): Head Start/EHS Policy Council

I acknowledge that I have taken the required training; and read and understand the Palm Beach County Code of Ethics Ordinance, the provisions of which are effective May 1, 2010. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: *Marie Chantale Saget* Date: 10/10/10

Please sign and return this FORM to {Insert Liaison Name Here} {Insert Address Here}. A self-addressed envelope has been provided for your convenience.

TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: STATE GUIDE TO THE SUNSHINE AMENDMENT &
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Please read and make yourself familiar with the Guide and return the acknowledgment form below to: (Insert Liaison Name) (Insert Liaison Address). If you cannot access this document on the web, please contact (Insert Liaison Name) at (Insert Liaison Telephone #) for other arrangements.

Acknowledgment of Receipt

NAME: Marie Chantale Saget
Print or Type

ADVISORY BOARD(S): Head Start/EHS Policy Council

I acknowledge that I have read the State of Florida Guide to the Sunshine Amendment and the Code of Ethics. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: Marie Chantale Saget Date: 10/07/10

Please sign and return to Administration in self-addressed envelope provided.

Revised 3/15/10

Saget Marie Chantale
5290 NW 6th Ct Delray Beach, FL 33445
(561) 929-5729 / (561) 637-6159
ctaloue@yahoo.com

RESUME

OBJECTIVE--- To build a career in office administration with more than ten years of experience including: non profit organization, strong background in Bookkeeper, account payable, reimbursement, keyboarding etc.

EDUCATION

— **Florida Atlantic University, Boca Raton, Florida**

Bachelor Degree in administration Major Accounting, January 2005, currently on hold

-----**Palm Beach Community College, Lake Worth Florida**

Bookkeeper, summer 2007

— **Institute National Administration General des Hautes Etudes International
Port-au-Prince Haiti**

Bachelor Degree, in Business Administration, July 1995

Employment History

01/2008 to Present: Self employment: Office Translation / Multi Services

09/2001 -01/2008 Haitian American Community Council, Delray Beach FL

- Checked figures, postings, and documents for correct entry, mathematical accuracy and proper codes.
- Operated computers programmed with Microsoft Words, Excel Fund E-Z and Pensoft, accounting software to record, store, and analyze information.
- Debit, Credit, and total accounts on computer spreadsheets and databases, using specialized accounting software.
- Classified, recorded and summarized numerical and financial data to compile and calculated, prepared, and issued bills invoices, account statement, and other financial statements according to established procedures.
- Accessed computerized financial information to answer general questions as well as those related to specific accounts.
- Operated 10-key calculators, computers and copy machines to perform calculations and produced documents.

Skills:

Computer Experience—

Fund E-Z; Microsoft office: word – Excel

Good Communication skills: Creole, French

REFERENCE: Upon request.

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

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.

Part I (to be filled out by Department): (Please Print)

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment

or

☐ District Appointment

Term of Appointment: _____ Years. From: 11/16/2010 To: 11/15/2013

Seat Requirement: Community Representative Seat #: 1

☐ *Reappointment

or

☒ New Appointment

or ☐ to complete the term of

Judith Dryer

Due to:

☐ resignation ☒ other
Term expired

Completion of term to expire on:

3/27/2010

***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 _____

Part II (to be filled out and signed by Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: HILL-SIMPSON KAREN LOUISE
Last First Middle

Occupation/Affiliation: Law Librarian

Business Name: Palm Beach County Sheriffs Office

Business Address: 3228 Gun Club Road

City & State: West Palm Beach Zip Code: _____

Residence Address: 1306 N. Mangonia Drive

City & State: West Palm Beach Zip Code: 33401

Home Phone: (561) 655 2958 Business Phone: (561) 688 4742 Ext.

Cell Phone: (561) 236 9896 Fax: ()

Email Address: hillkars@yahoo.com

Mailing Address preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes _____ No ☒

If Yes, state the court, nature of offense, disposition of case and date: _____

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)

Applicant's Signature: [Signature] Date: 10/4/10

Part III (to be filled out by Commissioner):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: [Signature] Date: 10/26/2010



TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: PALM BEACH COUNTY CODE OF ETHICS

Effective May 1, 2010, contractual relationships between Palm Beach County government and advisory board members, their employers, or businesses, are prohibited conflicts of interest as set forth in the Palm Beach County Code of Ethics, Ordinance 2009-051. This conflict of interest must be waived by an affirmative vote of five (5) members of the Board of County Commissioners upon full disclosure at a public meeting in order to accept appointment to an advisory board. In the space provided below, please identify any such contractual relationships, or verify that none exist at this time. The Ordinance (2009-051) and the training requirement can be found on the web at: <http://www.pbcgov.com/ethics/advisory.htm>

<u>Type of Contract</u>	<u>Which Department/Division</u>	<u>Effective Date</u>	<u>Term</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____ Yes, submit a waiver to the Board of County Commissioners, since I or my employer have/has the above named contract(s);

OR

☒ At this time, I nor my employer have contract(s) with the Board of County Commissioners

As a (current or potential) advisory board member you are required to receive training on the PBC Code of Ethics and acknowledge that you have read and understand the PBC Code of Ethics Ordinance.

If you are unable access the training and/or Ordinance on the web, please contact {Insert Liaison Name Here} at {Insert Telephone Number Here} for other arrangements.

Acknowledgment of Receipt

NAME: KAREN L. HILL-SIMPSON
Print or Type

FIRM/COMPANY/ORGANIZATION: Palm Beach County HS of EHS

ADVISORY BOARD(S): Policy Council

I acknowledge that I have taken the required training; and read and understand the Palm Beach County Code of Ethics Ordinance, the provisions of which are effective May 1, 2010. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: K. Hill-Simpson Date: 10/4/10

Please sign and return this FORM to {Insert Liaison Name Here} {Insert Address Here}. A self-addressed envelope has been provided for your convenience.

TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: STATE GUIDE TO THE SUNSHINE AMENDMENT &
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Please read and make yourself familiar with the Guide and return the acknowledgment form below to: (Insert Liaison Name) (Insert Liaison Address). If you cannot access this document on the web, please contact (Insert Liaison Name) at (Insert Liaison Telephone #) for other arrangements.

Acknowledgment of Receipt

NAME: KAREN L. HILL-SIMPSON
Print or Type

ADVISORY BOARD(S): Policy Council

I acknowledge that I have read the State of Florida Guide to the Sunshine Amendment and the Code of Ethics. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: Karen L. Hill-Simpson Date: 10/4/10

Please sign and return to Administration in self-addressed envelope provided.

Revised 3/15/10

1306 N. Mangonia Drive
West Palm Beach, FL 33401
Phone: 561 236 9896
E-Mail: hillkars@yahoo.com

KAREN HILL-SIMPSON

Education	2008	South University	West Palm Beach, FL
	Bachelor of Science in Legal Studies		
	2002	New England Institute of Technology	West Palm Beach, FL
	Associate Degree in Business Administration with Microsoft Certification in PowerPoint and Excel		
	1997	North Technical Education Center	Riviera Beach, FL
	State Certification as a Nursing Assistant and Home Health Aide		
Experience	2007-2008	Legal Aid Society of Palm Beach County, Inc.	West Palm Beach, FL
	Paralegal, Pro-Bono Project		
	Filed, conducted intake on new clients, scheduled appointments, prepared documents and correspondence, entered data into a case management system to update attorneys and clients information, referred cases to attorneys and assisted with appeals and medical records for the Social Security Administration.		
	2006	Legal Aid Society of Palm Beach County, Inc.	West Palm Beach, FL
	University Externship, Pro Bono Project		
	Filed, referred attorneys, screened clients and scheduled appointments.		
	2001-2002	New England Institute of Technology	West Palm Beach, FL
	Work Study Student, Technical Enrichment Center		
	Typed, tutored, and assisted in the center's daily operation.		
	1998-Present	Various Nursing Employment Agencies	Palm Beach County
	These include: Boca Nursing Services, United Nursing Services, Whatsyys Nursing Registry, Private Care, Inc., and Kramer Senior Services.		
	Patients' personal care, maintained patients safety and well being.		
	1997-1998	SEARS Department Store-Palm Beach Mall	West Palm Beach, FL
	Performed customer service and sales duties in the Ladies Department		
	Gold Star for punctuality-second quarter and Top rapid credit associate-fourth quarter.		
	1986-1996	Department of Correctional Services	Kingston, Jamaica
	Clerical Officer-Personnel Unit and Accounting Clerk-Accounting Unit		
	Personnel Unit: Reviewed job applications, updated service records, checked attendance registers, updated leave cards, etc. Accounting Unit: Wrote, recorded and issued checks, recorded all disbursements, prepared and made deposits, and balanced all accounts.		
Skills	Microsoft Office Suite, Westlaw, Findlaw, Kemps, legal research, drafting complaints, contracts, motions, summons, wills, subpoenas and interrogatories.		
References	Provided upon request		

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

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Part I (to be filled out by Department): (Please Print)

Board Name: Head Start/Early Head Start Policy Council

☒ At Large Appointment or ☐ District Appointment

Term of Appointment: _____ Years. From: 11/16/2010 To: 11/15/2013

Seat Requirement: Community Representative Seat #: 2

☐ *Reappointment or ☒ New Appointment

or ☐ to complete the term of _____ Due ☐ resignation ☐ other to: _____
Completion of term to expire on: _____

***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 _____

Part II (to be filled out and signed by Applicant): (Please Print)

APPLICANT, UNLESS EXEMPTED, MUST BE A COUNTY RESIDENT

Name: LINTON NICKALE
Last First Middle

Occupation/Affiliation: PARALEGAL

Business Name: LEGAL AID SOCIETY OF PALM BEACH

Business Address: 423 FERN STREET STE 200

City & State: W.P.B. FL Zip Code: 33401

Residence Address: 7117 HAWK NEST TERRACE

City & State: W.P.B. FL Zip Code: 33402

Home Phone: () Business Phone: (561) 932-9713 Ext.

Cell Phone: (561) 202-5293 Fax: ()

Email Address: NICKALE LINTON @COMCAST.NET

Mailing Address preference: ☐ Business ☒ Residence

Have you ever been convicted of a felony: Yes _____ No ☒

If Yes, state the court, nature of offense, disposition of case and date: _____

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) |

Applicant's Signature: Nickale Linton Date: 10/16/10

Part III (to be filled out by Commissioner):

Appointment to be made at BCC Meeting on: _____

Commissioner's Signature: [Signature] Date: 10-26-2010



TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: PALM BEACH COUNTY CODE OF ETHICS

Effective May 1, 2010, contractual relationships between Palm Beach County government and advisory board members, their employers, or businesses, are prohibited conflicts of interest as set forth in the Palm Beach County Code of Ethics, Ordinance 2009-051. This conflict of interest must be waived by an affirmative vote of five (5) members of the Board of County Commissioners upon full disclosure at a public meeting in order to accept appointment to an advisory board. In the space provided below, please identify any such contractual relationships, or verify that none exist at this time. The Ordinance (2009-051) and the training requirement can be found on the web at: <http://www.pbcgov.com/ethics/advisory.htm>

<u>Type of Contract</u>	<u>Which Department/Division</u>	<u>Effective Date</u>	<u>Term</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____ Yes, submit a wavier to the Board of County Commissioners, since I or my employer have/has the above named contract(s);

OR

_____ At this time, I nor my employer have contract(s) with the Board of County Commissioners

As a (current or potential) advisory board member you are required to receive training on the PBC Code of Ethics and acknowledge that you have read and understand the PBC Code of Ethics Ordinance.

If you are unable access the training and/or Ordinance on the web, please contact {Insert Liaison Name Here} at {Insert Telephone Number Here} for other arrangements.

Acknowledgment of Receipt

NAME: MICHAEL KINTON
Print or Type

FIRM/COMPANY/ORGANIZATION: NY / NY

ADVISORY BOARD(S): HEAD START / EARLY HEAD START

I acknowledge that I have taken the required training; and read and understand the Palm Beach County Code of Ethics Ordinance, the provisions of which are effective May 1, 2010. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: MICHAEL KINTON Date: 10/10

Please sign and return this FORM to {Insert Liaison Name Here} {Insert Address Here}. A self-addressed envelope has been provided for your convenience.

TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: STATE GUIDE TO THE SUNSHINE AMENDMENT & CODE OF ETHICS

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This guide addresses conflict of interest, disclosure, acceptance and reporting of gifts, use of position or property, voting conflicts, political activities, prohibition against misuse of the code, and enforcement. This Guide also addresses conflicts, prohibitions on doing business with the County or having conflicting employment or contractual relationships. The Guide can be found on the web at: <http://www.pbcgov.com/ethics/advisory.htm>

Please read and make yourself familiar with the Guide and return the acknowledgment form below to: (Insert Liaison Name) (Insert Liaison Address). If you cannot access this document on the web, please contact (Insert Liaison Name) at (Insert Liaison Telephone #) for other arrangements.

Acknowledgment of Receipt

NAME: MICHAEL LINTON
Print or Type

ADVISORY BOARD(S): HEAD START / EARLY HEAD START

I acknowledge that I have read the State of Florida Guide to the Sunshine Amendment and the Code of Ethics. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: Michael Linton Date: 6/15/10

Please sign and return to Administration in self-addressed envelope provided.

Revised 3/15/10

Mickale L. Linton, FRP, M.Ed.
Florida Registered Paralegal
7117 Hawks Nest Terrace, West Palm Beach, FL 33407
Email: mickalelinton@comcast.net
Telephone: (561) 202-5293

QUALIFICATION SUMMARY:

- Articulate and effective communicator with proven ability to work with diverse populations of people.
- Entrepreneur skills with strong planning, organizing, and leadership.
- Exceptional performance history in identifying and resolving complex administrative problems; resourceful in developing and implementing creative solutions resulting in increased productivity with enhanced sensitivity to cost and efficiency.

EDUCATION:

- **M.S. Education**
Lynn University, Boca Raton, FL 2006
- **B.S. Legal Studies, *Magna Cum Laude***
South University, (*ABA Approved*) West Palm Beach, FL December 2004

PROFESSIONAL TRAINING AND CERTIFICATIONS:

- **County Court Mediator**
Mediator # 20034C
Three day program that provided an understanding of mediation in theory, concept and practical application. The program also provided important conflict resolution skills necessary to mediate in all professional fields.
- **The Grant Institute, University of Miami**
Certified Grant Writer
Three day workshop that consists of program planning, professional grant writing and grant research.

PROFESSIONAL EXPERIENCE:

Paralegal, Legal Aid Society of Palm Beach County, Inc., West Palm Beach, FL
02/2004 - Present

- Performed all phases of juvenile dependency law from initial protective intake through termination of parental rights proceedings/litigation and subsequent adoption.
- Experienced working with emotionally and physically challenged children and adolescents.
- Experienced working with at risk adolescents. Targeting educational and independent living goals.
- Coordinated and calendar mediation, hearings, depositions and trial dates.
- Transcribed pleadings, memorandum of laws and correspondences.
- Provided exceptional litigation support through researching case law and managing and meeting discovery deadlines.
- Proficient in Microsoft Office, Outlook, FrontPage and PowerPoint and Web Sites.
- Proficient in legal research, using legal databases such as West Law, Lexis Nexis and findlaw.

Legal Assistant/Collections Assistant, Gelfand & Arpe, P.A., West Palm Beach, FL 07/2002 - 03/2004

- Performed all phases of the Condominium Homeowners Association collections and foreclosures.
- Calendared all demand deadlines and performed ATIDS search.
- Prepared and reviewed memoranda, case brief, pleadings and subpoenas.
- Managed input of billable time.

Customer Service Manager/Paralegal, Robert Bates Construction Company, West Palm Beach, FL 06/2000 - 07/2002

- Reviewed files, assisted and managed outside counsel with litigation.
- Gathered and organized documents for trial, hearings and depositions.
- Coordinated and calendared mediation, hearings, depositions and trial dates.
- Coordinated expansion opportunities on accounts and provided support during renewals and legal review and provisions in contracts and maintaining database.
- Provided legal review of marketing and collateral matters.
- Prepared and filed non-disclosure agreements.
- Prepared and negotiated complex contract agreements.
- Performed survey research, data analysis and evaluations.
- Demonstrated experiences in marketing, sales, purchasing and advertising.

Lead Passenger Service Agent, American Airlines, West Palm Beach, FL 09/1998 - 06/2000

- Provided superior customer service to passengers.
- Applied Knowledge of critical issues facing Federal Aviation operations.
- Assisted passenger service agents during training.

AWARDS:

- 2002 Alpha Lambda Delta, Honor Society (ALD)
- 2003 Community Service Award, South University
- 2004 Lambda Epsilon Chi (LEX)
- 2004 Outstanding Legal Studies Student, South University

COMMITTEE ASSIGNMENTS:

- 2003 -2004 President, South University Pro Bono Paralegal Association
- 2003-2004 Chairperson, South University Student Banquet
- 2004-Present Paralegal Advisory Board Member, South University
- 2005 Second Vice President, Paralegal Association of Florida, Palm Beach County Chapter
- 2006-Present Director, South University Legal Studies Alumni Club

REFERENCES:

- Doris Rachles, Esquire
Director and Chairperson Legal Studies, South University
561-697-9200
- Maxine Williams, Esquire
Magistrate, Palm Beach County, 15th Judicial Circuit
561-355-1994
- Damia Gordon, Esquire
Senior Attorney, Florida Department of Children and Families
561-837-5525

The information provided on this form will be used by County Commissioners and/or the entire Board in considering your nomination. This form MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Further, please attach a biography or résumé to this form.



TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: PALM BEACH COUNTY CODE OF ETHICS

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<u>Type of Contract</u>	<u>Which Department/Division</u>	<u>Effective Date</u>	<u>Term</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____ Yes, submit a waiver to the Board of County Commissioners, since I or my employer have/has the above named contract(s);

OR

☒ At this time, I nor my employer have contract(s) with the Board of County Commissioners

As a (current or potential) advisory board member you are required to receive training on the PBC Code of Ethics and acknowledge that you have read and understand the PBC Code of Ethics Ordinance.

If you are unable access the training and/or Ordinance on the web, please contact {Insert Liaison Name Here} at {Insert Telephone Number Here} for other arrangements.

Acknowledgment of Receipt

NAME: Tamara Starks
Print or Type

FIRM/COMPANY/ORGANIZATION: Palm Beach County Head Start & EHS

ADVISORY BOARD(S): Policy Council

I acknowledge that I have taken the required training; and read and understand the Palm Beach County Code of Ethics Ordinance, the provisions of which are effective May 1, 2010. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: [Signature] Date: 6/5/10

Please sign and return this FORM to {Insert Liaison Name Here} {Insert Address Here}. A self-addressed envelope has been provided for your convenience.

TO: ADVISORY BOARD MEMBERS

FROM: ROBERT WEISMAN
COUNTY ADMINISTRATOR

RE: STATE GUIDE TO THE SUNSHINE AMENDMENT &
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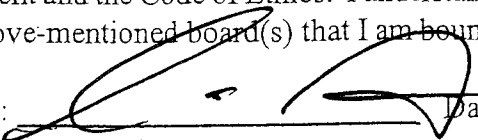
Please read and make yourself familiar with the Guide and return the acknowledgment form below to: (Insert Liaison Name) (Insert Liaison Address). If you cannot access this document on the web, please contact (Insert Liaison Name) at (Insert Liaison Telephone #) for other arrangements.

Acknowledgment of Receipt

NAME: Tamara Starks
Print or Type

ADVISORY BOARD(S): Policy Council

I acknowledge that I have read the State of Florida Guide to the Sunshine Amendment and the Code of Ethics. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature:  Date: 10/5/10

Please sign and return to Administration in self-addressed envelope provided.

Revised 3/15/10

TAMARA STARKS

161 South Flame Avenue, Pahokee Florida 33476
(Cell) 561-291-5636 (Home) 561-924-7302
Email: tamastar5@aol.com

EDUCATION:

Nova Southeastern University 2005-2007
Masters in Public Administration
Fort Lauderdale, Florida

Florida Coastal School of Law 2000-2003
Juris Doctorate
Admitted to the Florida Bar in 2003
Jacksonville, Florida

University of Florida 1997-2000
Bachelors in Business Administration
Minor in Education
Gainesville, Florida

EXPERIENCE:

Palm Beach County Sheriffs' Office 3228 Gun Club Road, West Palm Beach, Florida
(April, 2010-present)

Unit Manager (Re-Entry Program): Responsible for the daily operational, administrative, site and professional duties of Corrections Support Services which may include re-entry programs and the law library.

Duties: Manages, coordinates, monitors and evaluates existing inmate programs at three detention facilities especially as it relates to re-entry. Supervises, directs and evaluates assigned staff, addresses employee concerns and problems; direct work, counsels, disciplines and completes employee performance appraisals. Assists with identification, initiation and implementation of new inmate programs.

Department of Children and Families 2990 North Main Street, Belle Glade, Florida
(2007-April, 2010)

Department of Children and Families 1690 N.W. 9th Avenue, Okeechobee, Fl
(2005-2007)

Senior Attorney: Representing the Department of Children and Families in legal proceedings involving dependency cases which require parents to complete numerous social services such as Psychological and Psychiatric Evaluations, Substance Abuse Assessments, Residential and Outpatient Treatment; Parenting Classes, Individual and Family Counseling ,etc.

Duties: researching applicable law; communicating with client; giving legal advice; drafting motions; preparing memorandums of law; conducting non-jury trials; accessing liability; advising clients of legal ramifications that may arise and possible legal ramifications; instructing clients of departmental policies and procedures; keeping

informed of current state and federal laws affecting dependency proceedings, public speaking; participating in settlement conferences with opposing counsel and parents; data entry; observing receiving and otherwise obtaining information from all relevant sources; communicating with persons outside of the organization, representing the organization to the public, government, and other external sources; combining , evaluating and reasoning with information and data to make decisions and solve problem; knowledge of laws, legal codes, court procedures, precedents, government regulations, executive orders, agency rules; reviewing NCIC/FCIC and PALMS checks; inputting information in AG system along with FSFN; recommends services for parents' to complete.

19th Judicial Circuit Office of the Public Defender Fort Pierce, Florida (2003-2005)
Assistant Public Defender: Previously worked as a Public Defender in St. Lucie, Martin, Okeechobee, and Indian River County Representing Indigent clients in criminal proceedings in which they are the accused.

Duties : conducting client visits within a penal setting; drafting motion memorandums of law; conducting bond hearings; conducting criminal trials in Juvenile, Misdemeanor and Felony Courts; conducting jury and non-jury trials; participating in attorney client conferences; negotiations with State Attorney; conducting legal research; communicating with clients from a diverse population; visiting correctional facilities throughout the 19th Circuit; communicating with personnel from various Sheriff's offices; communicating with court personnel; advising clients regarding legal matters; investigate and complies documentation for clients defense; keeps informed of state and federal law regarding criminal law; drafts motion; public speaking.

US States Attorneys Office Middle District of Florida Jacksonville, Florida
(Summer 2002)

Law Clerk: Assisting attorneys with legal questions, work and research.

Duties include: Drafting memorandums of law, research, assisting the attorney in trial preparation

References available upon request

TO: ADVISORY BOARD MEMBERS

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COUNTY ADMINISTRATOR

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Acknowledgment of Receipt

NAME: Marie Chantale Saget
Print or Type

ADVISORY BOARD(S): Head Start/EHS Policy Council

I acknowledge that I have read the State of Florida Guide to the Sunshine Amendment and the Code of Ethics. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: *Marie Chantale Saget* Date: 10/07/10

Please sign and return to Administration in self-addressed envelope provided.

Revised 3/15/10

Saget Marie Chantale
5290 NW 6th Ct Delray Beach, Fl 33445
(561) 929-5729 / (561) 637-6159
ctaloue@yahoo.com

RESUME

OBJECTIVE--- To build a career in office administration with more than ten years of experience including: non profit organization, strong background in Bookkeeper, account payable, reimbursement, keyboarding etc.

EDUCATION

— **Florida Atlantic University**, Boca Raton, Florida

Bachelor Degree in administration Major Accounting, January 2005, currently on hold

-----**Palm Beach Community College**, Lake Worth Florida

Bookkeeper, summer 2007

— **Institute National Administration General des Hautes Etudes International**
Port-au-Prince Haiti

Bachelor Degree, in Business Administration, July 1995

Employment History

01/2008 to Present: Self employment: Office Translation / Multi Services

09/2001 -01/2008 Haitian American Community Council, Delray Beach Fl

- Checked figures, postings, and documents for correct entry, mathematical accuracy and proper codes.
- Operated computers programmed with Microsoft Words, Excel Fund E-Z and Pensoft, accounting software to record, store, and analyze information.
- Debit, Credit, and total accounts on computer spreadsheets and databases, using specialized accounting software.
- Classified, recorded and summarized numerical and financial data to compile and calculated, prepared, and issued bills invoices, account statement, and other financial statements according to established procedures.
- Accessed computerized financial information to answer general questions as well as those related to specific accounts.
- Operated 10-key calculators, computers and copy machines to perform calculations and produced documents.

Skills:

Computer Experience—

Fund E-Z; Microsoft office: word – Excel

Good Communication skills: Creole, French

REFERENCE: Upon request.



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COUNTY ADMINISTRATOR

RE: PALM BEACH COUNTY CODE OF ETHICS

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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

_____ Yes, submit a waiver to the Board of County Commissioners, since I or my employer have/has the above named contract(s);

OR

☒ At this time, I nor my employer have contract(s) with the Board of County Commissioners

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Acknowledgment of Receipt

NAME: Marie Chantale Saget
Print or Type

FIRM/COMPANY/ORGANIZATION: N/A

ADVISORY BOARD(S): Head Start/EHS Policy Council

I acknowledge that I have taken the required training; and read and understand the Palm Beach County Code of Ethics Ordinance, the provisions of which are effective May 1, 2010. I understand that as an advisory board member of the above-mentioned board(s) that I am bound by it.

Signature: *Marie Chantale Saget* Date: 10/10/10

Please sign and return this FORM to {Insert Liaison Name Here} {Insert Address Here}. A self-addressed envelope has been provided for your convenience.



**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
HEAD START/EARLY HEAD START POLICY COUNCIL**

I. AUTHORITY :

Resolution No. R-92-444, adopted 3/24/92, repealed and replaced by Resolution No. R2000-1866 on November 21, 2000; repealed and replaced by Resolution No. R2006-1878 on September 12, 2006.

II. APPOINTING BODY :

Board of County Commissioners

III. COMPOSITION, QUALIFICATIONS, TERMS & REMOVAL :

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.

(A) Parent Members: At least 51% of the members of the Head Start/Early Head Start Policy Council must be parents of Head Start/Early Head Start children presently enrolled in the PBC Head Start program. ("Parent members"). One parent member and at least one alternate shall be elected by the parents of children currently enrolled in the Head Start/Early Head Start Program at each center operated by PBC and each service area of the Early Head Start program. Alternate members may only vote at meetings at which the elected member is absent. However, the number of parent members may vary depending upon the number of centers and programs in operation. All parents serving on the Head Start/Early Head Start Policy Council as members or as alternates must be approved by the BCC.

(B) Community Representatives: Nine (9) members of the Head Start/Early Head Start Policy Council shall be representatives of the Community. ("Community representatives"). Community representatives must represent major public or private agencies or major community, civic or professional organizations which have a concern for children of low income families or may be parents of former Head Start /Early Head Start children. It is preferred that at least one member of the Head Start/Early Head Start Policy Council have a fiscal or accounting background.

(C) All Community representatives shall be at-large appointments of the BCC and ratified by the elected parent members of the Head Start/Early Head Start Policy Council.

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. County employees may not be appointed to the Head Start/Early Head Start Policy Council. Terms of Appointment: The term of membership shall be for three (3) years, however each year, Policy Council Members

EXTENDED COMPOSITION :

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 (3) years pursuant to federal regulations.

IV. MEETINGS :

Fourth Wednesday of the month at 6:00 p.m. at 3323 Belvedere Road, Building 509, West Palm Beach

V. FUNCTIONS :

The Council shall have general responsibility for establishing a method of hearing and resolving Community complaints about the Head Start program. They shall have operating responsibility for conducting self-evaluation 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.

VI. LIAISON INFORMATION :

<u>LIAISON DEPARTMENT</u>	<u>CONTACT PERSON</u>	<u>ADDRESS</u>
Community Services	Nicole Muhammad	3323 Belvedere Rd Bldg 501 West Palm Beach FL 33406 Phone # 561-233-1634



HEAD START/EARLY HEAD START POLICY COUNCIL

SEAT ID	CURRENT MEMBER	ROLE TYPE	RACE CODE	GENDER	BUSINESS / HOME PHONE	SEAT REQUIREMENT	APPOINT DATE	RE-APPOINT DATE	EXPIRE DATE
Appointed By : AT Large									
1	Judith Dryer N/A 2770 Foxhall Dr W West Palm Beach FL 33417	Member	AA	F	--	Community Rep.	02/27/2007		03/27/2010
NOMINATED BY :									
2	Vacant FL	Member	UN	M	--	Community Rep.			
NOMINATED BY :									
3	James Leger Badiovision fm'sea 1860 Old Okeechobee Road S West Palm Beach FL 33409	Member	AA	M	561-719-4098	Community Rep.	02/27/2007		03/27/2010
NOMINATED BY :									
4	Vacant FL	Member	UN	M	--	Community Rep.			
NOMINATED BY :									

Appointed By : AT Large

5	Vacant	Member	UN	M	--	Community Rep.
FL						

NOMINATED BY :

6	Vacant	Member	UN	M	--	Community Rep.
FL						

NOMINATED BY :

7	Vacant	Member	UN	M	--	Community Rep.
FL						

NOMINATED BY :

8	Vacant	Member	UN	M	--	Community Rep.
FL						

NOMINATED BY :

Appointed By : AT Large

9	Vacant	Member	UN	M	--	Community Rep.
	FL					

NOMINATED BY :

10	Elizabeth Morton	Member	AA	F	561-572-6128	Parent Representative Boynton Beach	11/03/2009	11/02/2012
	6073 Strawberry Field Way Lake Worth FL 33463							

NOMINATED BY :

10	Tiffany Morton	Alternate M	AA	F	561-674-5387	Parent Representative Boynton Beach	11/03/2009	11/02/2012
	420 NW 3rd Ave Boynton Beach FL 33435							

NOMINATED BY :

11	Gertha Fleurimont-Saint Louis	Member	AA	F	--	Parent Representative Jupiter	11/03/2009	11/02/2012
	3630 Florida Blvd Belle Glade FL 33410							

NOMINATED BY :

Appointed By : AT Large

11	Vacant	Alternate M	UN	M	--	Parent Representative Jupiter
	FL					

NOMINATED BY :

12	Tangela Washington	Member	AA	F	561-692-8011	Parent Representative South Bay	11/03/2009	05/04/2012
	570 Ranchero Rd Apt 1 Belle Glade FL 33430							

NOMINATED BY :

12	Salicia Jackson	Alternate M	AA	F	--	Parent Representative South Bay	11/03/2009	09/26/2011
	423 N Coconut Rd Apt 4 Pahokee FL 33476							

NOMINATED BY :

13	Vacant	Member	UN	M	--	Parent Representative Palm Glades
	FL					

NOMINATED BY :

Appointed By : AT Large

13	Brandy Smith	Alternate M	AA	F	561-996-9076	Parent Representative Palm Glades	11/03/2009	11/02/2012
	416 Palm Glades Dr Belle Glade FL 33430							

NOMINATED BY :

14	Deborah Wilson	Member	AA	F	561-859-1100	Parent Representative Delray Beach	11/03/2009	11/02/2012
	217 SW 6th Ave Delray Beach FL 33444							

NOMINATED BY :

14	Darline Garcon	Alternate M	AA	F	561-305-6609	Parent Representative Delray Beach	11/03/2009	11/02/2012
	3030 Angler Dr Delray Beach FL 33445							

NOMINATED BY :

15	Debra Jones	Member	AA	F	561-924-9273	Parent Representative Pahokee	05/05/2009	11/03/2009	05/04/2012
	140 Banyan Ave Pahokee FL 33476								

NOMINATED BY :

Appointed By : AT Large

15	Kenzea Osborne	Alternate M	AA	F	--	Parent Representative Pahokee	11/03/2009	11/02/2012
	2535 SW 14th Ter Pahokee FL 33476							

NOMINATED BY :

16	Ellen Hollingworth	Member	AA	F	561-422-8038	Parent Representative Westgate	11/18/2008	11/03/2009	11/02/2010
	8205 Belvedere Rd Apt 202 West Palm Beach FL 33411								

NOMINATED BY :

16	Joann Becerra	Alternate M	HA	F	561-847-4462	Parent Representative Westgate	11/03/2009	11/02/2012
	213 Lainhart Ct West Palm Beach FL 33409							

NOMINATED BY :

17	Vacant	Member	UN	M	--	Parent Representative Lake Worth		
	FL							

NOMINATED BY :

Appointed By : AT Large

17	Melanie Ventura	Alternate M	CA	F	561-209-9005	Parent Representative Lake Worth	11/03/2009	11/02/2012
	519 S "M" St Lake Worth FL 33460							

NOMINATED BY :

18	Lemita Lubin	Member	AA	F	561-667-1664	Parent Representative Riviera Beach	11/03/2009	11/02/2012
	9106 Ducale Way Apt 201 Palm Beach Gardens FL 33418							

NOMINATED BY :

18	Barbara Thomas	Alternate M	AA	F	561-845-7957	Parent Representative Riviera Beach	11/03/2009	11/02/2012
	1641 W 34th St Riviera Beach FL 33404							

NOMINATED BY :

19	Ivory Sherrod	Member	AA	F	561-429-6915	Parent Representative W. Palm Beach	11/03/2009	11/02/2012
	4532 Emerald Vista Apt 1285 Lake Worth FL 33461							

NOMINATED BY :

Appointed By : AT Large

19	Amy McDonald	Alternate M	AA	F	561-294-4447	Parent Representative W. Palm Beach	11/03/2009		11/02/2012
	1008 Abraham Ave West Palm Beach FL 33401								

NOMINATED BY :

20	Rosenie Daniels	Member	AA	F	561-909-8947	Parent Rep. Union Baptist Head Start	11/03/2009		11/02/2012
	423 Silver Beach Rd Lake Park FL 33403								

NOMINATED BY :

20	Bulaine Dominique	Alternate M	AA	F	561-844-5534	Parent Rep. Union Baptist Head Start	11/03/2009		11/02/2012
	520 Bayberry Dr Lake Park FL 33403								

NOMINATED BY :

21	Theoluna Talegrand	Member	AA	F	561-860-4377	Early Head Start/Delray Beach	11/18/2008	11/03/2009	09/26/2011
	8 Southern Cross Cir Apt 206 Boynton Beach FL 33436								

NOMINATED BY :

Appointed By : AT Large

21	Lydia Taylor	Alternate M	AA	F	561-503-8332	Early Head Start/Delray Beach	11/03/2009	11/02/2012
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332 S Swinton Ave
Delray Beach FL 33444

NOMINATED BY :

22	Vacant	Member	UN	M	--	Parent Rep/Tender Love & Care		
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FL

NOMINATED BY :

23	Vacant	Member	UN	M	--	Family Day Care Operator		
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FL

NOMINATED BY :

24	Sakina Bivins	Member	AA	F	561-541-2643	Early Head Start Home Based	11/03/2009	11/02/2012
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226 W 24th St
Riviera Beach FL 33404

NOMINATED BY :

Appointed By : AT Large

24	Diana Elias	Alternate M	AA	F	561-396-5420	Early Head Start Home Based	11/03/2009	11/02/2012
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1405 SW 2nd St
Boynton Beach FL 33435

NOMINATED BY :

25	Vacant	Member	UN	M	--	Parent Rep/Kidz Kaleidoscope		
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FL

NOMINATED BY :

26	Vacant	Member	UN	M	--	Apostolic Child Development Center		
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FL

NOMINATED BY :

27	Madacce Marques	Member	AA	F	561-506-6116	A Step Above	11/03/2009	11/02/2012
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2 Southern Cross Ln Apt 201
Boynton Beach FL 33436

NOMINATED BY :

Appointed By : AT Large

27	Nanne Lucce	Alternate M	AA	F	561-452-2873	A Step Above	11/03/2009	11/02/2012
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1 Southern Cross Ln Apt 206
Boynton Beach FL 33436

NOMINATED BY :

28	Mikeria Cromer	Member	AA	F	561-891-5227	Emmanuel Child Development Center	11/03/2009	11/02/2012
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5030 Palm Hill Dr
West Palm Beach FL
33415

NOMINATED BY :

28	Lakeysha Coleman	Alternate M	AA	F	561-201-3295	Emmanuel Child Development Center	11/03/2009	11/02/2012
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3954 Adler Dr Apt H2
West Palm Beach FL
33417

NOMINATED BY :

29	Vacant	Member	UN	M	--	Kings Kids		
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FL

NOMINATED BY :

Appointed By : AT Large

29	Michael Hill	Alternate M	AA	M	561-667-9570	Kings Kids	11/03/2009	11/02/2012
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17335 Lincoln Ln
Jupiter FL 33458

NOMINATED BY :

30	Lina Arango	Member	HA	F	561-722-3551	My First Steps	11/03/2009	11/02/2012
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4692 Sunset Ranch Rd
West Palm Beach FL
33407

NOMINATED BY :

30	Floridalma Marroquin	Alternate M	HA	F	561-891-3707	My First Steps	11/03/2009	11/02/2012
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1567 Manor Ave
West Palm Beach FL
33407

NOMINATED BY :

31	Byron Brown, Jr.	Member	AA	M	561-294-0303	San Castle Early Head Start	11/03/2009	11/02/2012
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1093 Summit Trail Cir Apt B
West Palm Beach FL
33415

NOMINATED BY :

Appointed By : AT Large

31	Christine Augustin	Alternate M	AA	F	561-424-1949	San Castle Early Head Start	11/03/2009	11/02/2012
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1151 18th Ave Apt 3
Lake Worth FL 33461

NOMINATED BY :

32	Vacant	Member	UN	M	--	Community Child Care Center		
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FL

NOMINATED BY :

33	Vacant	Member	UN	M	--	Highland Elementary	/ /	
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FL

NOMINATED BY :