



REQUEST FOR BOARD ACTION

ITEM NO. 26

DATE OF MEETING: June 20, 2016

REQUESTED BY: Melissa Long, Clerk to the Board

SHORT TITLE: Approval of Appointment Adjustment on the Pender County Advisory Board of Health.

BACKGROUND: The County Manager/County Clerk advertises vacancies on boards, commissions, committees, task forces, etc. The County Manager/County Clerk serves only clearinghouse functions with respect to the appointment process; no influence is exerted in this role. Commissioners are welcome to recruit applicants, or citizens may apply of their own free will.

Nicole Buchanan who was serving as the Pharmacist Representative on the Advisory Board of Health has had to resign due to some increase personal commitments. Angela Livengood who currently serves as a Public Member on the Advisory Board of Health is a pharmacist and it is requested that the Board change her appointment from Public Member to Pharmacist Representative. Ms. Livengood has been on the Advisory Board of Health since October 12, 2015. Her application is attached for Board review.

SPECIFIC ACTION REQUESTED: To consider amending an appointment on the Pender County Advisory Board of Health.

PENDER COUNTY

Application for Appointment to Boards/Commissions/Committees



Appointees to Pender County Boards/Commissions/Committees must be a Pender County resident and must be at least 18 years of age. Please complete this application and return to: Pender County Manager's Office, PO Box 5, Burgaw, NC 28425.

APPLICANT INFORMATION							
Last Name	Livingood	First	Angela	M.I.	S	Date	9/17/15
Physical Address	594 Highlands Drive			Apartment/Unit #			
City	Hampstead	State	NC	ZIP		28443	
Mailing Address (if different from above)							
City		State		ZIP			
Home Phone	Cell	910-789-0944	Work Phone	910-259-5451	E-mail Address 1		
Fax Number				8238	E-mail Address 2		
Board Interest(s)							
Advisory Board of Health; Pender County Nursing/Adult Care Homes Advisory							
How long have you been a resident of Pender County? 6 mo							
EDUCATION							
High School	Person Sr. High School		Location				
			Roxboro, NC				
From	8/1986	To	6/1989	Did you graduate?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	
College	UNC-CH		Location				
			Chapel Hill, NC				
From	8/1989	To	5/1994	Did you graduate?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	Degree
					BS Pharmacy		
Other	UNC-CH		Location				
			Chapel Hill, NC				
From	8/1994	To	5/1996	Did you graduate?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	Degree
					Pharm.D.		
EMPLOYMENT HISTORY							
Current Employment	New Hanover Reg. Med. Center			Job Title			
				Pender Memorial Hospital Pharmacy Mgr.			
Responsibilities	manage pharmacy operations, direct + develop medication use at PMH.						
Previous Employment	Rosal Discount Drugs			Job Title			
				Pharmacist			
Previous Employment	Community Pharmacy, Sew.			Job Title			
				Pharmacist			
Previous Employment	Person Memorial Hospital			Job Title			
				Pharmacist			
COMMUNITY INVOLVEMENT							
Please list current and past membership in civic or other organizations and offices held:							
None since moving to Pender County.							

Have you ever served or are you currently a member of any Pender County or other local government board/commission/committee?		
YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	If yes, explain (including length of service).
State reasons why you feel qualified for this appointment(s): <i>I am looking to become more involved in my new home county. Given my background in healthcare, I feel I could offer the most impact in health related boards. I am also interested population health, preventative care, + advocating for increased health literacy.</i>		
MILITARY SERVICE		
Branch	<i>NIA</i>	From To
Rank at Discharge		Type of Discharge (optional)
CONFLICTS OF INTEREST		
Are you aware of any legal, ethical or personal conflict of interest by serving as a member of this Pender County board/commission/committee?		
YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	If yes, explain.
Are you or any member of your family employed by Pender County, or currently serving on any Boards/Committee/Commission appointed by or affiliated with Pender County?		
YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	If yes, list family member name(s) and position/board or committee(s).
Please add any additional information you would like to share supporting your interest and qualifications for this appointment.		
<i>NIA</i>		
DISCLAIMER AND SIGNATURE		
NOTE: This information will be used by the Pender County Board of Commissioners in making appointments to Pender County Boards/Commissions/Committees. In the event you are appointed, it may be used as a news release to identify you to the community. This application is considered a public record.		
Signature	<i>Angela Livingood</i>	Date <i>9/17/15</i>