Expires 05/18/2022

EMPLOYMENT APPLICATION

CITATION CONTRACTOR	CITY OF DELRAY BEACH 100 NW 1st Avenue Delray Beach, Florida 33444 561-243-7125 <u>https://www.delraybeachfl.gov/home</u> ADAMO, JIANNY D. 01190 VOLUNTEER COMMITTEE / ADVISORY BOARD MEMBER			Received: 5/18/20 11: 55 AM For Official Use Only: QUAL: DNQ: Experience Training Other:
PERSONAL INFORMATION				
POSITION TITLE: VOLUNTEER COMMITTEE / ADVISORY BOARD MEMBER		EXAMID#: 01190		
NAME: (Last, First, Middle) ADAMO, JIANNY D.		SOCIAL SECURITY NUMBER: N/A		
ADDRESS: (Street, City, State/Province, Zip/Postal Code) 955 Egret Circle # B401, Delray Beach, Florida 33444		EMAIL ADDRESS: jianny@fearlesslove.net		
HOME PHONE: (561)450-5580	ALTERNATE PHONE: 201-925-4567		NOTIFICATION PREFERENCE: Email	
DRIVER'S LICENSE: ■ Yes ■ No	DRIVER'S LICENSE: State: FL Number:		LEGAL RIGHT TO WORK IN THE UNITED STATES? ■ Yes □ No	
PREFERENCES				
MINIMUM COMPENSATION: \$0.00 per hour; \$0.00 per year			ARE YOU WILLING TO RELOCATE? □Yes ■No □Maybe	
WHAT TYPE OF JOB ARE YOU LOOKING FOR? Regular				
TYPES OF WORK YOU WILL ACCEPT: Part Time				
SHIFTS YOU WILL ACCEPT: Day,Weekends				
OBJECTIVE: Contribute to our community.				
EDUCATION				
Nothing Entered For This Section				

WORK EXPERIENCE POSITION TITLE: DATES: EMPLOYER: Fearless Love, LLC From: 3/2011 To: Present Founder, Counselor, Author, Speaker ADDRESS: (Street, City, State/Province, Zip/Postal Code) Delray Beach, Florida HOURS PER WEEK: 40 DUTIES: Self-discovery * Relationship Coaching * Codependency * Lifestyle Management * Divorce Recovery Transition * Narcissistic Abuse * Fear & Anxiety * Depression * Work-Home Balance * Stress Reduction Responsible for: Marketing * Website * Blogging * Screening * Onboarding * Assessments * Billing EMPLOYER: DATES: POSITION TITLE: From: 3/2008 To: Present Mars & Venus Counseling Ctr Psychotherapist ADDRESS: (Street, City, State/Province, Zip/Postal Code) Teaneck, New Jersey HOURS PER WEEK: 40 DUTIES: Telehealth * Couples Counseling * Positive Communication * Overcoming Conflicts * Emotional Intelligence Screening * Assessments * Crisis Mgt. * Self-Care * Collaboration * Intimacy & Closeness * Confidence DATES: EMPLOYER: POSITION TITLE: From: 2/2015 To: 2/2016 Mars & Venus Counseling Ctr **Clinical Group Facilitator** ADDRESS: (Street, City, State/Province, Zip/Postal Code) Boynton Beach, Florida HOURS PER WEEK: 40 DUTIES: Lead Counseling & Psycho-Educational Groups * Counsel Women Recovering from Abuse & Addictions Sexual Assaults * Grief * Hope & Optimism * Coping Skills * Encouraging Wellness and Prevention CERTIFICATES AND LICENSES

Nothing Entered For This Section

Skills			
OFFICE SKILLS:			
Typing:			
Data Entry:			
OTHER SKILLS:			
LANGUAGE(S):			
Spanish - ■ Speak ■ Read ■ Write			
ADDITIONAL INFORMATION			
Professional Memberships			
Member of the Mental Health Counselors Association of Palm Beach County			

Volunteer Experience Board of Directors of Laver's Resort and Racquet Club Condominium B

REFERENCES

Nothing Entered For This Section

1.

2

Agency-Wide Questions

The Board application MUST be completed whether you submit a resume or not. It is important that your application show all the relevant experience and skills you possess that would assist you in serving on this committee or board. Applications must be received no later than ten (10) business days prior to the first City Commission meeting where the nomination for appointment to the board will be considered. Applications may be rejected if incomplete. Resumes alone WILL be rejected. PLEASE NOTE: A) ONCE YOU SUBMIT YOUR APPLICATION, YOU WON'T BE ABLE TO ADD OR CHANGE ANYTHING and you will NOT be able to reapply for the same position(s) during that posting period. B) The City of Delray Beach is a public entity subject to Chapter 119 of the Florida Statutes concerning public records. Therefore, please be advised that all applications are public record and subject to the disclosure provisions of Chapter 119 of the Florida Statutes. In addition, please be advised that applications will remain on file in the City Clerk's Office for a period of two (2) years from the date submitted. It is the applicant's responsibility to ensure that the application on file is current.

Declaration of Personal Information Exemption Personal Information provided in this application is public information unless the applicant qualifies for an exemption pursuant to Florida Statutes. You are encouraged to thoroughly read the applicable sub-sections of F.S. 119.071. If you qualify for an exemption, your address and phone number are protected information. If you have any questions, please contact the Clerk's Office at 561-243-7056. Do you qualify for a statutory exemption from public disclosure based upon F.S. 119.071?

No

- 3. If you stated yes to the above, please list under which sub-section of F.S. 119.971 do you qualify for a statutory exemption from public disclosure?
- 4. The City of Delray Beach does not discriminate on the basis of race, color, national origin, sex, religion, age or disability, marital status, family status or sexual orientation in employment or the provision of services. Acknowledged
- 5. I identify my gender as...

Female

6. Age

41-64

7. Occupation (If retired, please indicate former occupation or profession.)

Licensed Mental Health Counselor

8. How many years have you lived or worked in Delray Beach?

9 years

9. Employer name and address

Self-employed.

Founder of Fearless Love, LLC.

10. Home Phone 561-450-5580

11. Mobile Phone 201-817-9768

12. Business Phone

561-450-5580

13. Please contact me at the following phone number

Business

14. Please contact me at the following address.

Home mailing

15. Do you or any of your family members work for or serve on the board of directors of any organization which has contracted with or applied for funding from the City of Delray Beach?

No

16. Do you anticipate any involvement of this kind in the future? If yes, please describe the relationship.

no

17. Have you previously been employed by the City of Delray Beach?

No

- Have you served on the City Commission in the last year? No
- 19. Are you currently serving or have you previously served on any City boards?

No

- 20. If yes to above, then please list the boards that you have served on, and your contributions to each?
- 21. Do you have any relatives employed by the City of Delray Beach? No
- 22. EXPLANATION: If you entered yes for the question above, what is the name of the relative and your relationship. (Please indicate N/A if not applicable)
- 23. Are you a registered voter?

Yes

- 24. How does your education or experience compliment the powers and duties of the Board? yes
- 25. Please list any professional certifications, licenses or certificates that you possess that relate to the board for which you are applying.

MH 11563

 Valid e-mail address is necessary to be able to receive notifications from City Clerk's department including but not limited to notices
to schedule an interview, application received or rejected notices, etc. Most correspondence will be done through e-mail notifications. Please ensure that valid e-mail address shows on your application and that you remember your login information.

Acknowledged. It is my responsibility to provide a valid e-mail address for correspondence and e-mail notifications. I understand that if I don't check my e-mails or forget my login information, I might miss important messages regarding the position I applied for, and/or any tests or pre-requisites that might be required of me, which could result in missing the opportunity to be considered for the position.

27. I understand and agree that: The City of Delray Beach participates in E-Verify and will provide the federal government with your Form I-9 information to confirm that you are authorized to work in the U.S.

I understand and agree

Job Specific Supplemental Questions

- 1. I am interested in serving on the following committees, boards, groups or authorities. (Select up to 3 committees from the list below:)
 - Community Redevelopment Agency, Downtown Development Authority, Green Implementation Advisory Board
- 2. Please list any community activities that relate to this position.
- N/A
- 3. List any experience that would assist you in serving on this committee, board, commission, or authority For the past couple of decades. I have volunteered at church and on my condo association and enjoy working with groups.
- 4. Please indicate any activities you are involved with that may present a conflict of interest with the committee, board, commission, or authority you are applying for.

n/a

- 5. How did you hear about the vacancy on this committee, board, commission, or authority? City of Delray Beach Press Release
- 6. If "other" was selected for question # 6, please describe here.
- 7. Why do you want to serve on this committee, board or commission?

I live and work in Delray Beach for the past 9 years and have seen it's tremendous growth. I enjoy all our community has to offer and would be happy to contribute my time, expertise, and knowledge as a psychotherapist and artist.

8. What unique abilities/skillset/perspective would you bring if selected?

I am analytical, possess organizational skills, speak in public, and am warm and empathic.

9. Please describe your understanding of the functions and capacity of the board(s), committee(s), or commission to which you are applying?

We meet once a month. We don't receive pay and contribute and collaborate for the betterment of our community.

10. Have you ever attended a meeting of the board or committee for which you are applying?

No

- I understand that by applying to this committee, board, commission, or authority, I am offering a reasonable portion of 11. my time to the City of Delray Beach and the requirements that accompany this position, including, but not limited to,
 - routine meetings, hearings and responsiveness to the public.

Yes, I understand

The following terms were accepted by the applicant upon submitting the online application:

By clicking on the 'Accept' button, I hereby certify that every statement I have made in this application is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the U.S. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the City of Delray Beach and will not be returned. I understand the City of Delray Beach may contact prior employers and other references. I understand that I must notify the Human Resources Division of any changes in my name, address, or phone number.

This application was submitted by JIANNY D. ADAMO on 5/18/20 11:55 AM