



University of Plantation Application

Full Name: _____ Date: _____

Address: _____

Mailing Address: _____

Phone: _____ Email _____

I am a resident of the City of Plantation? YES NO
 Years: _____

I am a business owner in the City of Plantation? YES NO
 Years: _____

Name of Business: _____

Describe your occupation and/or professional status. If retired, describe your previous occupation.

Describe your educational background and any organizations in which you are or have been active.

List any Plantation Advisory Boards or Committees you have served on:

Why would you like to participate in University of Plantation?

What are some questions about the City of Plantation you would like to have answered?

How did you hear about University of Plantation?

Are you available on all the dates and times listed on Plantation.org/UP?

YES

NO

Do you require any special accommodation(s) to participate in this program? If yes, please specify: _____

YES

NO

Emergency Contact

Full Name: _____

Phone Number: _____

Applicant Personal Commitment

If selected, I will devote the time and effort necessary to meet graduation requirements. I will attend at least four (4) of the seven (7) classes. I will, to the best of my ability, act as an ambassador by sharing my knowledge with other Plantation residents.

IMPORTANT: In accordance with the Florida Sunshine Law, information provided in this application is part of the public records retained by the City of Plantation.

Signature: _____

Date: _____

All applications must be received by 4:00 p.m. on Friday, January 3, 2025.

Only completed applications will be considered. Seats are limited. Applications will be processed on first-come, first-serve basis. Completed applications may be submitted online, emailed to LKarpaviciute@plantation.org or dropped off to the Administration Office at City Hall.