

## Application Form

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### Profile

Sean \_\_\_\_\_ Burroughs \_\_\_\_\_  
First Name Last Name

4979 Andris St \_\_\_\_\_  
Home Address

North Port \_\_\_\_\_  
City

FL \_\_\_\_\_  
State

34288 \_\_\_\_\_  
Postal Code

sburroughs@myhst.com \_\_\_\_\_  
Email Address

Mobile: (619) 327-8625 \_\_\_\_\_  
Primary Phone Alternate Phone

### Please list three references (name only)

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Patricia Sharp Natalia Yakobuck Heather Shaughnessy

**Except as otherwise provided, all board members must reside in the city as least six months prior to appointment. Residency must be maintained throughout the term of office. Failure to maintain consistent residency within the city will result in automatic termination of the board appointment. One nonresident may serve as a voting member on each board, provided that the person has owned real property in the city for at least one year prior to the date of appointment. Ownership must be maintained throughout the term of office and will be determined by reviewing the Sarasota County Property Appraiser's records. Youth members must be at least 14 years-old and in high school. Board members may serve on only one board, with the exception of ad hoc, task force, or special committees appointed by the city commission.**

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Yes  No

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### Interests & Experiences

#### Which Boards would you like to apply for?

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Planning & Zoning Advisory Board: Submitted

**Are you currently serving on any other City Board/Committee? Board members may serve on only one board, with the exception of ad hoc, task force, or special committees appointed by the city commission.**

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Yes  No

**Were you ever removed from a City Board/Committee due to lack of attendance?**

Yes  No

**Do you have any relatives currently serving on a City Board/Committee or relatives that are currently serving on the same City Board/Committee for which you are applying? Relatives as defined in F.S. Chapter 112.3135; grandparents; and grandchildren may not (i) concurrently serve on the same board; or (III) concurrently serve on the city commission and a board that hears quasi-judicial items.**

Yes  No

**Are you retired?**

Yes  No

Compass Health Consultants

Employer

Health Insurance Broker

Occupation

[Sean Resume 2025.pdf](#)

Upload a Resume

**Please list any Civic organizations to which you belong.**

President of the North Port Area Chamber Board of Directors, Board Member of the Friends of the Shannon Staub Library

**Why do you desire to serve on the above Board/Committee? Please list any relative experience, if applicable.**

Continue to grow in and serve the community.

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## Demographics

**Ethnicity \***

African American

**Gender \***

Male

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## Acknowledgements

**Please Agree with the Following Statement**

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**I agree that if appointed, I will serve on the above board without compensation and at the pleasure of the City Commission.**

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I Agree

**Please Agree with the Following Statement**

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**I agree to abide by the Sunshine and Public Records Laws and attend all mandatory training sessions.**

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I Agree

Question applies to multiple boards

**I understand that membership on this board requires an annual Statement of Financial Interest disclosure form to be filed on or before July 1st of each year.**

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Yes  No

**Please indicate if any information provided on this application is exempt under Florida Statutes Chapter 119.07.**

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n/a