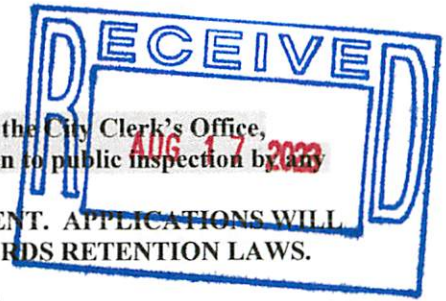


**CITY OF CAPE CORAL  
APPOINTMENT INFORMATION FORM**

Initials: Kevin KM

This Appointment Information Form, when completed, signed and filed with the City Clerk's Office, is a PUBLIC RECORD under Chapter 119, Florida Statutes, and, therefore, is open to public inspection by any person.



**YOU ARE RESPONSIBLE TO KEEP THE INFORMATION ON THIS FORM CURRENT. APPLICATIONS WILL BE RETAINED IN THE CLERK'S OFFICE IN ACCORDANCE WITH STATE RECORDS RETENTION LAWS.**

Please Type, if possible (or print clearly)

Date: 08/16/2023

Name: McGrail Kevin M.  
(Last) (First) (Middle)

E-mail address: Fikev@aol.com

Address: (H) 126 SE 1st Ave Cape Coral, FL Zip Code 33990

(O) \_\_\_\_\_ Zip Code 33990

Phone: (H) 239-458-1882 (O) \_\_\_\_\_ (C) 239-699-0097

Occupation: Medical Technologist MT(ASCP)

Employer: NCH Healthcare System Position: Senior Med Tech How Long: 32 yrs

Education: Highest education level achieved and institutions attended:

Name & Location	Dates Attended	Degrees Earned
<u>Michigan State University, E.Lansing MI</u>	<u>Sept 1975-June 1978</u>	<u>BS Medical</u>
<u>Technology/Chemistry</u>		

Have you ever held a professional or business license or certificate? Yes ☐ No ☐

If "Yes", please provide the title, issue date and issuing authority.

License/Certificate Title	Issue Date	Issuing Authority
<u>SU27767</u>	<u>May 1989</u>	<u>State of</u>
<u>Florida DPH</u>		

Board(s) /Commission(s) for which you are applying:

Affordable housing Advisory Committee and or Citizens Advisory Board CDB Block Grant

- |   |   |  |
|---|---|--|
| 1. Are you a U.S. Citizen?                              | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 2. Are you a Cape Coral Resident?                       | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |
| 3. Are you <u>currently</u> serving on a City Board(s)? | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |

If yes, which Board(s) and since when?

- |   |   |                             |
|---|---|-----------------------------|
| 4. Have you ever served on a City Board(s)? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> |
|---|---|-----------------------------|

If yes, which Board(s) and when?

Charter School Board Council Liaison

5. Are you currently serving on a Board, Authority, or Commission for another governmental agency?

Yes ☐ No ☒ If yes, what Board, etc. and since when?

**Work Experience:**

City Councilman Dist 6 from 2009 - 2013, Senior Medical Technologist at NCH from 3/28/1991  
to present, Medical Technologist VA Medical Center, Cape Coral 6 yrs

**Community Involvement:**

Puppy raiser for Southeastern Guide Dogs for 10 yrs. Member of Cape Coral Friends of Wildlife  
and Guardian Angels for Special Populations 2011 and 2013

**Interests/Activities:**

gardening, raising my Golden Retriever puppy, enjoying my 6 grandchildren who live in Cape  
Coral

**Why do you desire to serve on this/these Board(s)?**

I wish to see SMART growth in Cape Coral's future. Allowing us to continue to live in a SAFE  
and CLEAN City for years into the future. Affordable housing is important to me, since I would  
love to see my grandchildren continue to live in Cape Coral.

**How did you learn about the vacancy?** ☐ Cape Coral Website ☒ Newspaper ☐ Facebook ☐ Word of Mouth

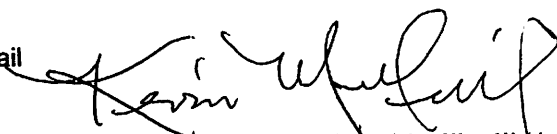
**A resume or separate sheet with additional information may be included.**

The City of Cape Coral Code of Ordinances, Section 2-60 has a limitation on offices held; however, this can be waived by a two-thirds (2/3) vote of City Council. If you are already serving on a Board, Authority, or Commission for the City of Cape Coral or for another governmental agency, you would have to be approved by a two-thirds (2/3) vote.

The City of Cape Coral Code of Ordinances, Section 2-57 states that an applicant for membership on a board, committee, or commission or a sitting member of those bodies shall not have any delinquent accounts with the City of Cape Coral at the time of appointment.

I understand the responsibilities associated with being a Board member, and I have adequate time to serve on the above Board(s).

Kevin McGrail  
Signature



8/16/23

Date

8/17/23

If you have any questions, please call the office of the City Clerk at (239) 574-0411. Return this form to:

**City of Cape Coral, City Clerk's Office, P.O. Box 150027, Cape Coral, Florida 33915-0027**

**FOR OFFICIAL USE ONLY**

Interviewed: \_\_\_\_\_ Date: \_\_\_\_\_

Yes ☐

No ☐

Council Action: \_\_\_\_\_ Date: \_\_\_\_\_