



# COUNTY OF NUECES

## APPLICATION FOR APPOINTMENT TO BOARD OR COMMISSION

\*Incumbents need not fill out this application; submit letter of interest only\*

**PLEASE TYPE OR PRINT YOUR INFORMATION TO COMPLETE THE APPLICATION.**

*A RESUME **MUST ACCOMPANY THE APPLICATION, BUT IT DOES NOT SERVE AS A SUBSTITUTE FOR COMPLETION OF THIS APPLICATION. CONSIDERATION WILL NOT BE GIVEN TO APPLICANTS WHO DO NOT HAVE A COMPLETED APPLICATION AT THE TIME THE APPOINTMENT IS PLACED ON THE AGENDA.***

**For what Board or Commission are you applying?** Board of Trustees of the Behavioral Health Center of Nueces County

PERSONAL INFORMATION			
Name	David Schroll		
Home Address	3805 Elvis Drive		
City	Corpus Christi, Texas	Zip Code	78414
Phone	(361) 290-6294	Work Phone	(361) 852-9665
Email Address	,		
Residence in Nueces County	<input type="checkbox"/> Precinct 1	<input type="checkbox"/> Precinct 2	<input checked="" type="checkbox"/> Precinct 3 <input type="checkbox"/> Precinct 4
Current Employer	Family Counseling Service		
Dates of Employment	FROM 3/16/10		TO 3/14/16
<b>Have you served on any board, commission, committee or as an elected official in Nueces County?</b>			
<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES		If you answered yes, please list position and dates of service.	
<b>Do you or an immediate family member* have any professional or financial relationship that may present a potential conflict of interest for this board, commission or similar body? (i.e., employment, contracts, financial investment)</b>			
<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES		If you answered yes, please explain below.	
<b>Do you or any immediate family member* have or have had any pending legal matters related to Nueces County or any board, commission or similar body within Nueces County?</b>			
<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES		If you answered yes, please explain below.	

EDUCATIONAL BACKGROUND			
<input type="checkbox"/> GED	<input type="checkbox"/> HS Diploma	<input checked="" type="checkbox"/> College Degree (indicate degree)	MS Counseling Psychology
CERTIFICATIONS			
Type	Licensed Professional Counselor #61600	Expiration Date	12/31/17
Type	Licensed Sex Offender Treatment Provider #99228	Expiration Date	7/31/17
Type		Expiration Date	
Type		Expiration Date	
PROFESSIONAL AND COMMUNITY AFFILIATIONS/POSITIONS HELD (PRESENT APPOINTMENTS TO BOARDS, COMMISSIONS, ADVISORY BOARD OR COMMITTEE)			
Name of Organization	none	Dates of Service	
Name of Organization		Dates of Service	
Name of Organization		Dates of Service	
COUNTY BOARD OR COMMISSION INFORMATION			
<b>Explain why you are interested in serving on this Board or Commission and what experience you bring that would assist in decision making and future actions of this Board or Commission.</b>			
As a former employee (2007-10) and professional in the mental health field I am strongly invested in success and services that the Behavioral Health Center provides. I have worked in mental health services in differing capacities since 1995 and believe that as such I would be an asset to the Behavioral Health Center. Currently, I am the Executive Director at Family Counseling Services and I am keenly aware how strongly board members play a integral part into an agencies functioning. I would appreciate the opportunity to serve the Behavioral Health Center and Nueces County as a board member. Previous employment includes: Texas Youth Commission (1995-2003), Scott Hammel PHD (2003-2006) psychometric tester, Senior Connections (2006-2007), NCMHMR (2007-2010), and Family Counseling Service (2010-present)			

I hereby certify that the foregoing answers are true. I further certify, should I be **considered for appointment** to a board, commission, advisory board or committee I will disclose in this application whether I am an employee of the governmental entity of which I seek appointment, I will disclose all appointments that may result in conflicting loyalties, and I will disclose if a family member is an employee of the governmental entity that I seek appointment. Also should I be **appointed** to a board, commission, advisory board or committee, and should a conflict of interest exist or develop with regard to a specific matter, I will disclose the conflict of interest upon discovery and recuse myself from the deliberations and action involved. Conflicts of interest include, **but are not limited to:** a direct or indirect financial interest by myself or a member of my family, and other interest, which impairs my ability to participate fairly in the deliberations and actions in question.

David Schroll

Digitally signed by David Schroll  
DN: cn=David Schroll, o=Nueces County, ou=Texas, email=dschroll@nuecescountytx.gov, c=US  
Date: 2016.11.16 11:41:49-0500

3/14/16

Signature

Date

***\*Immediate family member definition: wife, child, spouse of child, mother, father, aunt, uncle, grandparent***

**APPLICATION AND RESUME MUST BE SUBMITTED TO THE COUNTY JUDGE EMAIL OR USPS TO  
[loyd.neal@co.nueces.tx.us](mailto:loyd.neal@co.nueces.tx.us)**

**MAILING ADDRESS:**

**901 Leopard Street, Suite 303 Corpus Christi, Texas 78401**

***Information provided in "Application for Appointment to Board or Commission" is subject to public disclosure under the Texas Public Information Act or other applicable law.*** Pursuant to Section 552.1175 of the Texas Government Code a peace officer, county jailer, commissioned security officer, and certain others with law enforcement or prosecution related responsibilities may restrict access to certain personal information. A form requesting restriction of access can be obtained through the County Judge's office