Profile				
Kathleen First Name		Sullivan Last Name		
ktsullivan51@gmail.com _{Email Address}	Initial			
9612 Riverside Dr, #106 Street Address			Suite or Apt	
Sebastian			FL	32958
City			State	Postal Code
Home: (860) 581-0002				
Primary Phone	Alternate Ph	one		
retired Employer	professo Humani ob Title	or of English & ities		
Which Boards would yo	ou like to ap	oply for?		
CSAC - Children's Services	Advisory Com	mittee: Submitted		
How long have you bee	en a residen	nt of Indian River	County?	
7 years				
Are you a full-time or p	art-time re	sident? Select or	ne. *	
✓ Part Time				
Please list current empexperience that may be				t any business
30 years as professor of lite	erature & hum	nanities		
Please list any licenses	you presei	ntly hold:		
Please list any organiz	ation of wh	ich you are curre	ntly a membe	er:
Democrat Women's Club Ve	ero Beach Art	Club American Asso	ociation of Unive	ersity Women
Please list any other co	ommittees o	or boards you cui	rrently sit on:	:

Submit Date: Nov 25, 2024

Interests & Experiences

Why are you interested in serving on a board or commission?

because I care about the education and well-being of disadvantaged children

Upload a Resume

Demographics

Race (Used for State Reporting) *

✓ Caucasian

Do you have a government recognized disability? (Used for State reporting information)