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Lowndes County Board/Agency Appointee Information Sheet - Submission #98

Date Submitted: 12/8/2021

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Board/Agency Applying For:

Department of Behavioral Health Development Disabilities

Last Name

Richard

First Name

Carlton

Street Address

4344 Dockside Drive

City/State/Zip

Valdosta/ Georgia / 31602

Phone Number

Email Address

Occupation

Public Health & Safety

Professional Experience

12 years corrections and law enforcement.
Former member of Autism Speaks

Knowledge & Skills

I work well with diverse groups and can lead and be lead effectively.

What knowledge or skills do you possess that would contribute to the Board/Agency to which you are requesting to be appointed?

Please list the Board/Agency that you have been or are currently a member of:

Autism Speaks, Central Florida