

## **Profile** Eric Reikenis First Name Middle Initial Last Name 5912 NW Theda Lane Home Address FL Port St Lucie 34983 Postal Code City eric@portstluciehomesonline.com Email Address What district do you live in? http://www.cityofpsl.com/districts \* □ District 1 Home: (561) 339-1344 Primary Phone Alternate Phone Retired? Eric Reikenis, PA Realtor Real Estate Job Title Occupation Employer Which Boards would you like to apply for? Planning & Zoning Board: For Review Were you nominated or recommended to apply by the Mayor or a Councilmember? If Yes, by whom? Stephanie Morgan Please Agree with the Following Statement I have read and guarantee that I meet all the requirements for board service.

Submit Date: Feb 11, 2022

### Interests & Experiences

Eric V Reikenis

I Agree

Why are you interested in serving on a board or committee?
I'm looking for opportunities to serve my community.
Why do you think you are qualified to serve on this board or committee?
I'm a long-standing resident of Port St Lucie.
Brief description of Education & Experience
I hold an AS degree in physical therapy and an AA general degree. I currently maintain a Physical Therapist Assistant license. I a licensed real estate agent and active Realtor in the community.
Resume.docx Upload a Resume
Demographics
Ethnicity
✓ Caucasian/Non-Hispanic
Gender
04/10/1979
Date of Birth  Do you now serve on any City Board, Committee or other Governmental Board or  Committee? (NOTE: You cannot serve on more than one Board or Committee within the City of Port St. Lucie during the same time period.)
○ Yes ⊙ No
Are you a registered voter?
⊙ Yes ⊃ No
How long have you been a City resident?
11 years
Have you attended the City University classes?
C Yes ⊙ No
Are you a United States Citizen?
⊙ Yes ○ No

Are you presently employed by the City of Port St. Lucie?
⊙ Yes ⊙ No
Are you a current or former law enforcement officer, other employee* or the spouse or child of one who is exempt from public records disclosure under FS 119.07?
○ Yes ⊙ No
Have you ever been convicted of a crime, pled guilty or no contest to a criminal charge, or entered into an agreement setting forth the terms leading to the reduction or dismissal of the charges?
C Yes ⊙ No
Please Agree with the Following Statement

I agree that all of my answers are truthful and accurate to the best of my ability. I understand that if I have falsified any information my application will be withdrawn and I will not be

considered for appointment.

# ERIC REIKENIS, PTA

3313 SW Foremost Drive Port St Lucie, FL 34953 · 561-339-1344 eric@portstluciehomesonline.com

My career objective is to provide quality, effective, and efficient physical therapy services according to a plan of care prescribed by and under the supervision of a registered physical therapist using evidence-based treatment protocols to help patients attain their personal goals and highest functional level.

### **EXPERIENCE**

#### **2005 - PRESENT**

## PHYSICAL THERAPIST ASSISTANT, LIBERTY REHAB, LLC

Provided sub-acute, skilled nursing and long-term care physical therapy treatments according to the plan of care prescribed by and under the supervision of a physical therapist.

#### 2010 - 2016

## PHYSICAL THERAPIST ASSISTANT, GULF STREAM THERAPEUTICS, LLC

Provided home health physical therapy treatments according to the plan of care prescribed by and under the supervision of a physical therapist.

2009 - 2010

## PHYSICAL THERAPIST ASSISTANT, EMERALD HEALTH CARE CENTER

Provided sub-acute, skilled nursing and long-term care physical therapy treatments according to the plan of care prescribed by and under the supervision of a physical therapist.

#### 2005 - 2009

## PHYSICAL THERAPIST ASSISTANT, TOTAL THERAPUETIC CONCEPTS, LLC

Provided home health physical therapy treatments according to the plan of care prescribed by and under the supervision of a physical therapist.

#### 2002 - 2015

## PHYSICAL THERAPIST ASSISTANT, THE GARDENS COURT

Provided sub-acute, skilled nursing and long-term care physical therapy treatments according to the plan of care prescribed by and under the supervision of a physical therapist.

#### 2004

## PHYSICAL THERAPIST ASSISTANT, UNC HEALTHCARE SYSTEMS

Provided sub-acute, inpatient physical therapy treatments according to the plan of care prescribed by and under the supervision of a physical therapist.

### 2002 - 2004

## PHYSICAL THERAPIST ASSISTANT, PALM BEACH ORTHOPAEDIC INSTITUTE

Provided outpatient orthopaedic and sports related physical therapy treatments according to the plan of care prescribed by and under the supervision of a physical therapist.

### 2001 - 2002

## PHYSICAL THERAPIST ASSISTANT, HOPE HEALTH AND WELLNESS

Provided outpatient orthopaedic and sports related physical therapy treatments according to the plan of care prescribed by and under the supervision of a physical therapist.

## **EDUCATION**

#### 2001

## ASSOCIATE OF SCIENCE PHYSICAL THERAPIST ASSISTANT, SOUTH UNIVERSITY

Graduated Magna Cum Laude from the Physical Therapist Assistant program.