



WORKING COMMITTEE PARTICIPATION FORM

It is anticipated that Working Committees will mostly communicate through telephone conference calls. If you are unable to use this technology, paper copies of meeting notes can be sent to you via ground mail. Please indicate below your contact information and if you need to participate via ground mail. **You may save and e-mail the completed form to Gretchen Wall at: glw53@cornell.edu. You may also mail this form to Gretchen at: 630 W. North Street, NYSAES – Food Research Lab, Geneva, NY 14456, or fax it to her at: (315) 787–2284.**

PLEASE PRINT CLEARLY OR TYPE

1. Name (Last, First, Middle):		
2. Residence Address (include ZIP code):		3. Home Phone No:
		4. E-Mail Address:
5. Company/Business Name:		6. Occupation/Title:
7. Company/Business Address (include ZIP Code):		8. Business Phone No:
		9. FAX No:
10. Working Committee Interest (select all that apply):		
1(D)—Core Curriculum/General Topics 2(E)—Core Curriculum/Hazards & Preventive Controls — Common Issues 3(F)—Core Curriculum/Hazards & Preventive Controls — Farm Review 4(G)—Core Curriculum/Hazards & Preventive Controls — Production 5(H)—Core Curriculum/Hazards & Preventive Controls — Harvest 6(I)—Core Curriculum/Hazards & Preventive Controls — Postharvest Handling 7(J)—Train the Trainer Lesson Plan 8(K)—Education Outreach Program Delivery — Farmers & Trainers 9(L)—Education Outreach Program Delivery — Regulators & Trainers 10(M)—Certification-related activities		
For Questions 11-16, please attach an additional page if necessary		
11. Describe your occupational experience relative to produce safety:		
A. How long have you been engaged in this activity?		
	Years	Months

<p>B. To be completed by farmers only:</p> <p>i. What is the size of your farming operation? (List acreage and commodity, i.e., 25 acres apples, 20 acres blueberries).</p>	<p>Commodity:</p> <p>Acres</p> <p>Commodity:</p> <p>Acres</p> <p>Please attach an additional page if necessary</p>
<p>ii. What type of operation do you farm:</p>	<p>Conventional</p> <p>Organic</p> <p>Other</p>
<p>12. List education and any specialized experience:</p>	
<p>13. List applicable education and training programs that you have developed, conducted or implemented:</p>	
<p>14. List applicable farm/handler/producer/importer or co-op member industry organizations (include whether a member or officer and how long affiliated):</p>	
<p>15. List other affiliations and/or service as a community leader that would benefit you in your role as a member of the working committee:</p>	
<p>16. Provide any additional information you think would be helpful:</p>	
<p>17. Name as you would prefer it to appear on official correspondence:</p>	
<p>18. Preferred method of receiving communication</p> <p>Telephone</p> <p>Fax</p> <p>Ground Mail</p> <p>Email</p> <p>Other communication avenues</p>	
<p>19. Signature:</p>	<p>Date</p>