**Multnomah County Food Advisory Board**

**Membership Application 2013**

Multnomah County is looking for individuals to join the Multnomah County Food Advisory Board (FAB), to advise the County on ways to leverage the local food system in order to improve the delivery of public services. **Because issues such as nutrition, health, food insecurity and food access disproportionately impact low income and communities of color, we encourage individuals who work primarily in such communities to apply**

*Multnomah County will reasonably modify policies or procedures and provide auxiliary aids or services to persons with disabilities. Please call 503-988-3450 with such requests.*

Please return completed applications along with a current Resume by **March 25th at 5pm** to:

Multnomah County Office of Sustainability

501 SE Hawthorne Blvd., Suite 600

Portland, OR 97214

Or e-mail completed applications to [multnomahfood@multco.us](mailto:multnomahfood@multco.us).

Note: *The Multnomah County Board of Commissioners will use the information from this form to assess applicants’ qualifications and to make appointments to the Food Advisory Board. Please note that information provided in this document is* ***public information****, with the exception of the confidential section (information in the confidential section will only be disclosed as required by law).*

**Name**: *First M.I. Last*

**Mailing Address**: *Street, City, State, ZIP*

**Occupation**:

**Daytime Phone**: **E-mail Address**:

1. Please explain why you would like to serve on the Multnomah County Food Advisory Board.

2. Please list *relevant* skills or knowledge that you will bring to the Food Advisory Board. *(This could include skills or knowledge in public service, social equity, food systems, etc.)*

3. Please list *relevant* work or volunteer experience that contributes to your expertise in food systems issues and/or public service.

4. Please describe your experience working on diverse teams or committees:

5. What is the greatest challenge in Multnomah County that the local food system can help address?

*My signature affirms that all information contained herein is true to the best of my knowledge, and that I understand that any misstatement of fact or misrepresentation of credentials may result in this application being disqualified from further consideration.*

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

***\*Please note this optional information must remain on a separate page from the rest of the application.***

OPTIONAL INFORMATION

We ask that you voluntarily provide the following information for statistical purposes, such as tracking the geographical diversity of board and commission appointees. By providing this information, you will help us ensure that appointments represent a broad cross-section of the community. You are under no legal obligation to provide this information. State and federal law prohibit the use of this information to discriminate against you. The County will treat this information as confidential to the fullest extent allowed by law.

Age:

Race/Ethnicity:

Gender:

Disability: No Yes *If yes, please specify:*