

**STATE OF CALIFORNIA
DEPARTMENT OF FOOD AND AGRICULTURE
CERTIFIED FARMERS' MARKET PROGRAM**

**CERTIFIED FARMERS' MARKET ADVISORY COMMITTEE
PROSPECTIVE MEMBER APPOINTMENT QUESTIONNAIRE**

CFM – 120 (Rev. 11/2017)

PERSONAL INFORMATION

NAME: _____ DATE: _____
MAILING ADDRESS: _____
TELEPHONE NUMBER: _____ FAX NUMBER: _____ EMAIL: _____

PROFESSIONAL INFORMATION

NAME OF COMPANY, MARKET, OR ASSOCIATION: _____
HOW LONG HAVE YOU PARTICIPATED IN THIS INDUSTRY? _____
PLEASE LIST NAMES AND DATES OF ANY INDUSTRY, TRADE, OR MARKET ASSOCIATIONS AND/OR PROGRAMS THAT YOU ARE AND/OR HAVE BEEN ASSOCIATED WITH:

WHAT IS YOUR OBJECTIVE(S) OF SERVING ON THIS COMMITTEE: _____

ADDITIONAL INFORMATION

PLEASE INDICATE WHICH MEMBER POSITION YOU ARE SEEKING TO FILL AND ANSWER THE ASSOCIATED QUESTIONS.

CERTIFIED PRODUCER WHAT IS YOUR CERTIFIED PRODUCERS CERTIFICATE NUMBER? _____
LIST THE COMMODITIES THAT YOU GROW: _____
PRODUCTION ACREAGE: _____ LOCATION (CITY AND COUNTY): _____
NUMBER OF CERTIFIED FARMERS' MARKET IN WHICH YOU PARTICIPATE: _____ ARE YOU ORGANIC: Yes No

CERTIFIED FARMERS' MARKET OPERATOR
YEARS EXPERIENCE AS A MARKET OPERATOR: _____ NUMBER OF MARKETS THAT YOU OPERATE _____
LOCATION OF MARKETS THAT YOU OPERATE: _____

PUBLIC MEMBER
LIST YOUR EXPERIENCE AND PARTICIPATION IN THE CERTIFIED FARMERS' MARKET INDUSTRY: _____

THE FORM 700 IS REQUIRED TO BE COMPLETED ANNUALLY BY COMMITTEE MEMBERS ONCE APPOINTED TO THE COMMITTEE. INFORMATION NECESSARY TO FILE A FORM 700 IS LOCATED AT THE CDFA WEBSITE AT [HTTP://WWW.CDFA.CA.GOV/Form700/](http://www.cdfa.ca.gov/Form700/) AND AT THE CALIFORNIA FAIR POLITICAL PRACTICES COMMISSION (FPPC) WEBSITE AT [HTTP://WWW.FPPC.CA.GOV/](http://www.fppc.ca.gov/). IN ADDITION, EACH MEMBER IS REQUIRED TO COMPLETE AN ETHICS ORIENTATION ON-LINE CLASS WHEN APPOINTED AND THEN AGAIN EVERY TWO YEARS THEREAFTER.