**Email your application and résumé to** [**grants@cdfa.ca.gov**](mailto:grants@cdfa.ca.gov) **by 5:00 p.m. on October 4, 2020**

**COMMITTEE PARTICIPATION**

Technical Review Committee members are required to review, score, and provide written feedback for all assigned concept and grant proposals by the stated deadline using the web-based Financial Assistance Application Submittal Tool (FAAST). The Technical Review Committee will meet three times using an on-line platform (details to be provided). The Concept and Grant Proposal review meetings will occur over five days. The exact day that each funding category will meet is to be determined. Committee meetings are essential to the technical review process and attendance at these meetings is strongly encouraged.

**Please carefully review the schedule below for any potential conflicts:**

* Meeting 1: Introduction and Overview: Wednesday, **October 27, 2021**
* Concept Proposal reviews due: Wednesday, **December 1, 2021**
* Meeting 2: Concept Proposal Review: **December 8-10, 2021 and December 13-14, 2021**
* Grant Proposal reviews due: Wednesday, **March 30, 2022**
* Meeting 3: Grant Proposal Review: **April 6-8, 2022 and April 11-12, 2022**

**FAIR COMPETITION AND CONFLICT OF INTEREST**

Technical Review Committee members are allowed to submit grant applications to the Specialty Crop Block Grant Program. However, in order to maintain the integrity of the competitive process, the California Department of Food and Agriculture discourages Technical Review Committee members from serving on any funding category subcommittee to which they or their employer will submit a proposal, as well as any funding category subcommittee where conflicts of interest are likely to occur.

A conflict of interest may occur if a Technical Review Committee member:

* Has served as an advisor/advisee of an applicant;
* Has collaborated with an applicant;
* Is currently affiliated with, previously employed by, or is being considered for employment by an applicant;
* Holds a personal/familial relationship with an applicant; or
* Has participated in a consulting/financial arrangement with an applicant.

Technical Review Committee members are required to notify Specialty Crop Block Grant Program staff if they are involved in or have a conflict of interest with any grant applications in order to be recused from review/discussion. In addition, all Technical Review Committee members are required by the California Fair Political Practices Commission to file the Form 700 Statement of Economic Interests Assuming and Leaving Office and complete online ethics and sexual harassment training courses (approximately 1-2 hours each).

**INTERNET ACCESS AND SOFTWARE COMPATIBILITY**

Reliable internet access is integral to the Technical Review Committee process. Important communications from Specialty Crop Block Grant Program staff will be sent to Technical Review Committee members via email. Technical Review Committee members will be required to review proposals using FAAST. In addition, Technical Review Committee members must have a reliable internet connection and computer software capable of opening Adobe PDF (.pdf), Microsoft Office Word (.docx), and Excel (.xlsx) files.

**Email your application, résumé, and Conflict of Interest Form to** [**grants@cdfa.ca.gov**](mailto:grants@cdfa.ca.gov)

**Please be sure to review the committee participation schedule**

**CONTACT INFORMATION**

|  |  |
| --- | --- |
| ***Name:*** | Enter name |

|  |  |
| --- | --- |
| ***Address:*** | Enter address |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***City:*** | Enter city | ***State:*** | Enter state | ***Zip:*** | Enter zip code |

|  |  |  |  |
| --- | --- | --- | --- |
| ***Phone:*** | Enter phone number | ***Email:*** | Enter email address |

**REVIEWER AND EMPLOYMENT HISTORY**

|  |  |
| --- | --- |
| ***New Reviewer*** |  |
| ***Returning Reviewer*** |  |

Provide your employment history for the past two years, including the name of the organization you currently work for and your position/title. If you are employed by a university or government entity, please specify your department or division.

|  |  |
| --- | --- |
| ***Employer Organization:*** | Enter employer organization name |
| ***Position / Title:*** | Enter position or title |

|  |  |
| --- | --- |
| ***Employer Organization:*** | Enter employer organization name |
| ***Position / Title:*** | Enter position or title |

**CONFLICT OF INTEREST DISCLOSURE**

Provide the names of any organizations, businesses, colleges/universities, boards, commissions, professional groups, etc. that you belong to that may present a conflict of interest and briefly describe the nature of your affiliation. For more information on what constitutes a conflict of interest, please refer to the Conflict of Interest Form.

**Affiliated Organizations / Nature of Affiliation:**

|  |  |
| --- | --- |
| ***1:*** | Enter affiliated organization name and nature of affiliation |
| ***2:*** | Enter affiliated organization name and nature of affiliation |
| ***3:*** | Enter affiliated organization name and nature of affiliation |
| ***4:*** | Enter affiliated organization name and nature of affiliation |

**FUNDING CATEGORY PREFERENCE**

Indicate your preferred Specialty Crop Block Grant Program funding categories from the following five options. All Technical Review Committee applicants are strongly encouraged to provide both a first and an alternate funding category choice. For more information on the funding categories, please refer to the current Request for Concept Proposals.

* Grown in California
* Healthy Specialty Crops for All Californians
* Equity, Opportunity, and Education for All California Specialty Crop Farmers
* Environmental Stewardship, Conservation, and Climate Smart Agriculture
* Plant Health and Pest Management

|  |  |
| --- | --- |
| ***First Choice:*** | Enter first funding category choice |

***Briefly highlight your relevant experience and describe your qualifications for serving as a reviewer for this funding category:***

|  |
| --- |
| Enter relevant experience and qualifications |

|  |  |
| --- | --- |
| ***Alternate:*** | Enter second funding category choice |

***Briefly highlight your relevant experience and describe your qualifications for serving as a reviewer for this funding category:***

|  |
| --- |
| Enter relevant experience and qualifications |