APPLICATION FOR THE CASS CLAY FOOD COMMISSION		
Applicant Information		
Name:		
Phone:		
Email:		
Preferred mailing address:		
City:	State:	ZIP Code:
Employment Information		
Current/most recent employer:		
Position:		
Why are you interested in serving on this commission?		
Please share any training or experience you have, particularly around food systems or local policy work.		
What skills or expertise do you have that would enhance the work of the food commission?		
Please provide a brief bio (200 words or less): **NOTE: this may be used for publication to describe the commission		
Signature:		Date:
Please return this form to Michelle Draxten – MDraxten@FargoND.gov		

Or mail to:

Fargo Cass Public Health Attn: Michelle Draxten 1240 25th Street South Fargo, ND 58103-2367