Pesticide Analytical and Response Center (PARC) Public Member Application



Pesticide Analytical and Response Center 503.986.4635

This form will assist the Oregon Department of Agriculture Director and Oregon Health Authority Director in evaluating applicants for appointment as the public member to the Pesticide Analytical and Response Center Board. Functions of the PARC Board are identified in Oregon Revised Statutes, Chapter 634.500. Information about PARC may be obtained at https://oda.direct/PARC. Deadline for applying is October 30, 2024.

Applicant Information

Preferred Title:				
Applicant Name:				
Affiliation:				
Occupation:				
Mailing Address:				
City, State, ZIP Code:				
Phone:	Email:			
Signature:		Date:		
Signature:		Date:		

By signing above, you certify that:

- All of the information on this form is true;
- You will accept the appointment to the Pesticide Analytical and Response Center board if selected by the Director and pledge my best efforts to resolve, before assumption of office, any conflicts of interest that would be inconsistent with my responsibilities:
- You have an email address and are able and willing to check your email on a regular basis;
- You will be able to attend scheduled meetings in-person or by conference call.

Applicant Name:	
Statement of Inter	rest
	you are interested in serving as the public member on the Pesticide Analytical and Response complete this section on a separate sheet.
	rience / Background
Describe your professi	ional work experience and background. A current resumé may be substituted for this section.

Applicant Name:	
	have done with diverse or underrepresented communities. If appointed, what steps would you pration with diverse or underrepresented communities?
cover and who was the	u have conducting outreach or developing outreach materials? What topics did the material intended audience? Please include examples. Using these examples as a framework, how elop outreach materials for diverse and traditionally underserved communities?

Applicant Name:	
Please outline your k movement, as well as	nowledge of pesticides. This may include use, risks, risk mitigation, health, safety, environmental pesticide regulations.
What experience do y public?	ou bring to the PARC board that would help to ensure that you would be able to represent the

Applicant Name:			
Please explain why you wish to be the public member on the PARC board.			
Professional Expe	rience / Background		
Are you currently serv	ing on a state board or commission other than this one?	Yes	☐ No
If yes, please list.			
Please list all organiza	tions in which you have held memberships and the number of years.		
Conflicts of Interes	st		
Please identify any po	tential conflicts of interest you may have by serving on this board.		

References

Please identify two references that may be contacted if you are selected as a top candidate. Individuals or representatives of associations/organizations are acceptable.

REFERENCE 1			
Name:			
Affiliation:			
Mailing Address:			
City, State, ZIP Code:			
Phone:		Email:	
REFERENCE 2			
Name:			
Affiliation:			
Mailing Address:			
City, State, ZIP Code:			
Phone:		Email:	
	and may be used for data collection against you.		reciate information about your background. This nder state and federal law, this information may no
African American,			Hispanic/Latino
American Indian/	Alaskan Native		Native Hawaiian/Pacific Islander
Asian] Multi/Other
Caucasian/White			
Gender identity:			LGBTQ Disability

Please send your completed interest form via email to: parc@oda.oregon.gov or via mail to:

Pesticide Analytical and Response Center

Attn: Gilbert Uribe Valdez, PARC Board Administrator Oregon Department of Agriculture 635 Capitol St. NE Salem, OR 97301

Phone: 503.986.4651 Fax: 503.986.4735