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| DFRS-BFRB-081docx (rev. 04/2024) | | | | | | | |
|  | Wisconsin Department of Agriculture, Trade and Consumer Protection  Division of Food and Recreational Businesses  PO Box 8911, Madison, WI 53708-8911  Phone: (608) 224-4700 | | | | | | |
| *Retail Food Safety Advisory Council - Application Form*  *Wis. Stat. § 15.04(1)(c)* | | | | | | | | |
| Retail Food Safety Advisory Council - Application Form | | | | | | | | |
| Completion of this form is required to apply for the Council. Failure to complete the form may result in denial of your application. Upon appointment to the Council, your name, organization, and photograph (optional) will be displayed under the members section on the Council’s webpage. Personally, identifiable information you provide may be used for purposes other than that for which it was collected. Wis. Stat. § 15.04(1)(m). This information will be available for public review upon request, pursuant to Wisconsin's Public Records Law, Wis. Stat. §§ 19.31 to 19.37. | | | | | | | |
| I would like the opportunity to serve on the Retail Food Safety Advisory Council (Council). | | | | | | | |
| CANDIDATE NAME | | | | CANDIDATE AFFILIATION (business or association to which you are affiliated) | | | |
| CANDIDATE TITLE | | BUSINESS EMAIL | | | BUSINESS PHONE  (     )     - | | |
| BUSINESS ADDRESS | | | CITY | | | STATE | ZIP CODE |
| What category best describes your affiliation? | | | | | | | |
| Wisconsin Restaurant Association representative | | | | | | | |
| Tavern League of Wisconsin representative | | | | | | | |
| Wisconsin Grocers Association representative | | | | | | | |
| Wisconsin Fuel & Retail Association representative | | | | | | | |
| Retail food establishment serving meals industry member (large food facility or chain) | | | | | | | |
| Retail food establishment not serving meals, such as grocery store (large) | | | | | | | |
| Convenience store industry member with significant food service | | | | | | | |
| Local regulatory officials: Representing Wisconsin Association of Local Health Departments and Boards (WALHDAB) | | | | | | | |
| Wisconsin Technical College System or Universities of Wisconsin representing the culinary programs in Wisconsin | | | | | | | |
| An at-large member | | | | | | | |
| Wisconsin Hotel & Lodging Association representative | | | | | | | |
| Wisconsin Association of Meat Processors representative | | | | | | | |
| Wisconsin Bakers Association representative | | | | | | | |
| Retail food establishment serving meals industry member (small food facility less than 50 units/locations) | | | | | | | |
| Retail food establishment not serving meals, such as grocery store (small) | | | | | | | |
| Meat establishment industry member with a retail food service operation | | | | | | | |
| Wisconsin Department of Public Instruction (DPI) Schools and Institutions Representative | | | | | | | |
| What retail *food* safety or regulatory experience, and/or education, would you bring to the Council? | | | | | | | |
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| What interpersonal, organizational, and/or leadership skills would you bring to the Council? Please list any current or previous participation on other councils/committees/boards. | | | | | | | |
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| In what capacity/role could you share information and communicate with the constituency you represent? | | | | | | | |
|  | | | | | | | |
| Would you be able to attend quarterly meetings and contribute time to other RFSAC subcommittee/activities?   YES  NO | | | | | | | |
| Other areas of interest (tell us about yourself): | | | | | | | |
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| Applications are reviewed and submitted to the Secretary of the Wisconsin Department of Agriculture, Trade and Consumer Protection for consideration. | | |
| Please send to: | OR | EMAIL this form: Fill in electronically and attach digital copies of your papers and send to: |
| Retail Food and Recreational Program Section  DATCP – DFRS  PO Box 8911  Madison, WI, 53708  (608) 224-4700 | [DATCPDFRSretailfoodsafetyadvisory@wisconsin.gov](mailto:DATCPDFRSretailfoodsafetyadvisory@wisconsin.gov) |