



Johnson County Food Policy Council Member Application Form

The Johnson County Food Policy Council (FPC) serves as an advisory body that reviews and recommends policies to the Board of County Commissioners and other pertinent entities to strengthen the local food economy and improve access to healthy and nutritious food.

The mission of the Johnson County Food Policy Council is to improve the health and wellbeing of individuals, the community and our environment through a just, equitable and sustainable food system in Johnson County.

Through policy recommendations, education and collaborations, we strive to increase access to healthful food that is locally produced when available.

The Johnson County Food Policy Council will:

- Create a forum for discussion and coordination for community-wide efforts to improve the nutritional, environmental, economic, and social health of Johnson County.
- Build the capacity of local food policy bodies to find common ground on policy priorities, generate public support for those policies, and educate residents and community leaders on issues in our food system.
- Develop strategies to effectively address food access, hunger, obesity, community development, economic development, agriculture, food waste, and nutrition and food education.

Members of the Johnson County Food Policy Council will:

- Serve for a term of three (3) years.
- Demonstrate a commitment to respectfully engage diverse stakeholders within the community and seek to understand their concerns.
- Be willing to engage in problem-solving and decision making.
- Be willing to work in the public interest for the benefit of the food system, rather than directly representing any organization with which they are affiliated.
- Attend monthly FPC meetings as stated in by-laws.
- Engage in working groups.
- Be willing to bring organizational resources to the table.
- Commit to gaining consensus on issues.

Name: _____ Email address: _____

Place of Business or Affiliation: _____ Title: _____

Does your business or organization serve Johnson County? Yes No

Residential Address: _____ City: _____ Zip: _____

Business Address: _____ City: _____ Zip: _____

Preferred Mailing Address: Residential Business

Preferred Contact Number: _____

Demographic Information:

Gender: Female Male

Age: under 18 18 - 25 26 - 35 36 - 55 56 - 75 76 +

Ethnicity/Race: [check all that apply]

Asian/Pacific Islander Black or African American Caucasian/White Hispanic or Latino

Native American American Pacific Islander Other Prefer not to answer

Please identify if you have WORKED in the following sectors: [check all that apply]

Private sector Public Sector Non-profit Government

Workforce status: Employed Retired Not in workforce Youth/Student

Professional/ Volunteer Experience: [check all that apply]

University/College Early Child Education Child Nutrition Program Public Health K - 12 Education

Nutritionist/Dietician Healthcare Professional Private Health Org/Hospital Extension

Research Institution Community Health Obesity/Chronic Disease Prevention Sustainability

Elected Official Business Other

Food System Experience: [check all that apply]

Farmer Farmers Market Restaurant/Chef Grocery Store Transportation Wholesaler

Distribution Food Chain/Franchise Retail Production Processing Consumption & Marketing

Waste Management & Resource Recovery Anti-Hunger Organization Purchaser Consumer

Sustainable Agriculture Built Environment Other

What are your principal areas of interest in the Johnson County Food Policy Council?

What experience or special knowledge can you bring to the Johnson County Food Policy Council?

List any relevant community organizations to which you belong (attach supplemental sheet if necessary):

Would you be able to attend? Day meetings Evening meetings Either/Both

Please attach your resume and/or biography to this application form to provide the JCDHE director with a summary of your background and experience.

If submitting electronically, your typed name will serve as your signature.

Signature: _____ Date: _____

Please return completed form to:

Johnson County Department of Health and Environment

Attn: Director

11875 S. Sunset, #300

Olathe, Kansas 66061

To submit electronically: Save completed form to your computer and then insert the saved file as an attachment in an email to renee.bryant@jocogov.org