## Peer Reviewer Application and Qualifications Form For the Specialty Crop Multi-State Program

Complete the information below to indicate your qualifications to review SCMP proposals. Email this completed form and your résumé to janise.zygmont@ams.usda.gov. The subject line of the email message should read SCMP Reviewer Application. For more information about the grant program, visit http://www.ams.usda.gov/services/grants/scmp.

Last Name:	First Name:	
Job Title:		
Organization Name:		
Organization Address:		
Office Phone:	Cell Phone (optional):	
Email Address:		

## **Employer Type:**

	Federal (specify Agency)
	State Agriculture Department
	University or College
	Producer Organization/Association
	Other (specify)

## Areas of Expertise (check all that apply):

Food Safety	Production	
Production	Plant Pests and Diseases	
Post Harvest/Handling/Processing	Invasive Plants/Weed control	
Producer/Processor Education/Training/Tech Assistance	Soil Science/Nutrients/Cover Crops/Fumigation	
Traceability	Genetics/Plant Breeding/Cultivar Selection/New Varieties	
Microbiology	Mechanization/New Technology	
Consumer Education	Water Issues including irrigation, drought mitigation	
FSMA Requirements	Increasing Yields/Efficiency	
GHP, GAP, GMP	Aquaponics/Hydroponics	
Other (specify)	Greenhouse Production	
	Ecosystems/IPM/Pollinator Habitat	
	Other (specify)	
Marketing/Promotion		
Market Assessment	Exporting Specialty Crops	
Market Development/Marketing campaigns	Local/Regional Food Marketing Issues	
Consumer Education/Preferences	Other (specify)	

Other			
	General Producer Training/Technical Assistance		Food Technology/New Product Development

## **Crop-Specific Expertise:**

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	Fruit
	Vegetables
	Tree Nuts
	Nursery/Horticulture
	Floriculture
	Other (specify)

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