



BIFAD Event Registration Template

OMB: XXXX-XXXX

Expiration Date: XX/XX/XX

Thank you for your interest in attending the Board for International Food and Agriculture Development (BIFAD)-sponsored [Name of Event] on [Date and Time]. This event will be held [virtually, in person, or mixed virtual and in person]. Please RSVP to the event by providing the information below. An email confirmation will be sent to you after submission.

BIFAD is committed to increasing diversity, equity, inclusion, and access in the board's engagement and in global development more generally. This effort can be enhanced with reliable information about our stakeholders. If you choose to respond to all or some of the questions, information will remain confidential, with individual information not reported beyond the project team.

Paperwork Reduction Act Statement:

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is XXXX-XXXX. Public reporting for this collection of information is estimated to be approximately one minute per response.

Fields with (*) denotes a required field.

1. First or Given Name*
2. Family or Last Name*
3. Professional or Work Email*
4. Have you attended a BIFAD-hosted event in the last 12 months?*

 - a. Yes
 - b. No
 - c. I don't know

5. Organization Name
6. Organization Type (select most relevant response below)*
 - a. Prefer not to answer
 - b. U.S. university
 - c. University outside the U.S.
 - d. U.S. Agency for International Development
 - e. Other U.S. Government
 - f. Non-U.S. Donor Organization
 - g. Non Profit Organization
 - h. Firm

- i. Independent Consultant
- j. Publicly Traded Organization
- k. Other

[Add branching- Responses of 5A go to Q6, all other responses on Q5 skip to Q7]

7. For faculty, staff, and students of U.S universities only, is your university identified as any of the following Minority Serving Institution (MSI) types?
 - a. Alaska Native-Serving Institutions (ANSI)
 - b. Asian American Native American Pacific Islander-Serving Institutions (AANAPISI)
 - c. Historically Black Colleges and Universities (HBCU)
 - d. Hispanic-Serving Institutions (HSI)
 - e. Native American-Serving Non-Tribal Institutions (NASNTI)
 - f. Native Hawaiian-Serving Institutions (NHSI)
 - g. Predominantly Black Institutions (PBI)
 - h. Tribal Colleges and Universities (TCU)
 - i. No
 - j. I do not know

8. What is your age group?
 - a. Prefer not to answer
 - b. 18-24 years old
 - c. 25-29 years old
 - d. 30 years or older

9. What is your current gender identity?
 - a. Woman/girl
 - b. Man/boy
 - c. Additional gender identity
 - d. Prefer not to answer

10. What is your country of residence? – [Add list of all current countries according to U.N]

11. If you selected the United States of America as your country of residence, what are your racial and ethnic identities? (please select all identities with which you identify)
 - a. Prefer not to answer
 - b. Asian
 - c. American Indian or Alaska Native
 - d. Black or African American
 - e. Hispanic or Latino
 - f. Native Hawaiian or Pacific Islander
 - g. North African or Middle Eastern
 - e. White

12. Are you interested in receiving updates on upcoming BIFAD events and the latest BIFAD-supported reports and resources?
- a. By selecting "YES" below, you are opting in to receive email communication from BIFAD or the BIFAD Secretariat. You may opt out of future communications by contacting bifadsupport@tetrattech.com from your subscribed email, noting "unsubscribe" or "opt-out". Your information will not be shared outside of this purpose. Thank you for signing up to receive occasional updates and opportunities to connect with BIFAD. Please direct any questions about this form to: bifadsupport@tetrattech.com.
 - i. Yes
 - ii. No