

Connect with the Board for International Food and Agricultural Development (BIFAD)

OMB: XXXX-XXXX

Expiration Date: XX/XX/XX

Thank you for your interest in BIFAD. If you would like to receive updates on upcoming BIFAD events and the latest BIFAD-supported reports and resources, please share your information below.

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.

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Fields with (*) denotes a required field.

F	irst or Given Name: *
	2
F	amily or Last Name: *
	3
P	rofessional or Work Email: *
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	rofessional or Work Email: *
	rofessional or Work Email: *
	rofessional or Work Email: *
	rofessional or Work Email: * 4 Vhat is your current gender identity? *
	rofessional or Work Email: * 4 Vhat is your current gender identity? * Woman/girl

5 **Organization Name: *** 6 Organization Type (select most relevant response below): * Prefer not to answer **U.S University** University outside the U.S U.S. Agency for International Development Other U.S Government Non-U.S Donor Organization Non Profit Organization Firm **Publicly Traded Company** Independent Consultant Other

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For faculty, staff, and students of U.S universities only, is your university identified as any of the following Minority Serving Institution (MSI) types?

\bigcirc	Alaska Native-Serving Institution (ANSI)	
\bigcirc	Asian American and Native American Pacific Islander-Serving Institution (AANAPISI)	
\bigcirc	Historically Black College or University (HBCU)	
\bigcirc	Hispanic-Serving Institution (HSI)	
\bigcirc	Native American-Serving Non-Tribal Institution (NASNTI)	
\bigcirc	Native Hawaiian-Serving Institution (NHSI)	
\bigcirc	Predominantly Blank Institution (PBI)	
\bigcirc	Tribal College or University (TCU)	
\bigcirc	No	
\bigcirc	I do not know	
	8	
What is your country of residence?		
Cal		
26I	Select your answer	

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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)

	Prefer not to answer	
	Asian	
	American Indian or Alaska Native	
	Black or African American	
	Hispanic or Latino	
	Native Hawaiian or Pacific Islander	
	North African or Middle Eastern	
	White	
	10	
What is your age group?		
\bigcirc	Prefer not to answer	
\bigcirc	18-24 years old	
\bigcirc	25-29 years old	
	30 years or older	

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Thank you for signing up to receive occasional updates and opportunities to connect with BIFAD. Please direct any questions about this form to: bifadsupport@tetratech.com.

Yes

Thank you for your interest in BIFAD's work!





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