

UNITED FRESH PRODUCE INDUSTRY LEADERSHIP PROGRAM

2010 - 2011 APPLICATION



I. Biographical Data

Name:

Nickname:

Title:

Company:

Business Address:

City, State & Zip:

Phone:

Fax:

E-mail:

Produce Business Segments (check all that apply):

Broker/Agent

Packaging/Equipment/Agricultural Input

Commodity Board/Industry Association

Provider

Distributor/Wholesaler

Retail Operator

Exporter

Service Provider/Consultant

Fresh Produce Processor

Transportation Provider

Foodservice Operator

Grower/Shipper/Packer

Importer

Number of Years in the Produce Industry:

Employment History *(Please attach resume or biographical information if available.)*

Employer	Dates	Title/Responsibilities/Accomplishments

Education:

Military Service:

List Any Honors Received:

II. Volunteer Activity *(include any leadership positions or offices held)*

Industry Trade Association:

Political:

Community:

School:

Church:

Other:

III. Philosophy of Leadership

Please include your typed response to the following two questions:

1. In 200 words or less, state why you would like to participate in the Produce Industry Leadership Program, describing your leadership strengths/potential.
2. In 200 words or less, describe what you consider to be the most important challenges/opportunities facing the produce industry today.

IV. References

List four references not related to you; at least three should be outside your company. Include all contact information.

Name: Company: Title/Position: Phone: Email: Relationship: How Long Known:	Name: Company: Title/Position: Phone: Email: Relationship: How Long Known:
Name: Company: Title/Position: Phone: Email: Relationship: How Long Known:	Name: Company: Title/Position: Phone: Email: Relationship: How Long Known:

Personal interviews also may be conducted prior to final selection.

I have read the eligibility requirements for participation in the Produce Industry Leadership Program and give my permission for contact of the references provided above. I hereby certify that all statements made in this application are true and complete. I understand that selection of applicants is the sole responsibility of the Produce Industry Leadership Program Advisory Committee, and that United Fresh reserves the right to evaluate all Associate member applications with regard to the competitive position of the sponsoring company. I have reviewed the program dates and if selected, I will participate in all activities required of the class.

Applicant's Signature _____ Date _____

To be completed by applicant's supervisor (must be completed before submission):

_____ (Applicant) has my permission and support to be involved in the 2010-2011 Produce Industry Leadership Program, and to fulfill all requirements of the Program, including approximately 21 days of travel.

Supervisor's Signature _____ Date _____

Supervisor's Name (Printed) _____

Applications Must Be Received No Later Than March 5, 2010

Please return completed application: **United Fresh Produce Association**, 1901 Pennsylvania Ave., NW, Suite 1100, Washington, DC 20006, Phone: (202) 303-3400 * Fax: (202) 303-3433 * Email: jjacocks@unitedfresh.org