

New York State Department of Agriculture and Markets

Onion Research and Development Program Advisory Board Nomination Form

I, _____, nominate _____ to
serve as an Advisory Board member for New York State's Onion Research and Development
Program. If appointed, the nominee will serve for the 4/1/2023 – 3/31/2026 term.

Nominee Position (i.e. – Grower):

Nominee address:

Phone:

Email:

Nominator signature: _____

Address: _____

Phone: _____

Email: _____