



**OREGON
DEPARTMENT OF
AGRICULTURE**

Oregon State Weed Board

Interest Form

The Oregon State Weed Board was created within the State Department of Agriculture. The board shall consist of seven members appointed by the Director of Agriculture per ORS 569.600 to 560.620. This seven-member board represents noxious weed control interests from across the state. The primary mission of the board is to guide statewide noxious weed control priorities and to award noxious weed control grants from OWEB lottery funds. The board also develops and maintains the state noxious weed list.

Select which position you are applying for:

- ☐ Resident of the state **east** of the summit of the Cascade Mountains
- ☐ Resident of the state **west** of the summit of the Cascade Mountains
- ☐ Individual recommended by the Association of Oregon Counties
- ☐ ALL APPLICANTS – Please check here if applying for reappointment

Applicant Information

Preferred Title					
Applicant Name					
Affiliation					
Occupation					
Mailing Address					
City		State		Zip	
Phone Number		Cell or Alternate Number			
Email					
Applicant Signature				Date	

By signing above, you certify that:

- ⇒ All of the information provided by me on this form and on any attachments is true to the best of my knowledge;
- ⇒ You are a legal citizen of Oregon and the United States of America;
- ⇒ **If appointed by the Director of Agriculture:**
 - You will accept appointment if selected by the ODA Director;
 - You have an email address and are able and willing to check your email on a regular basis; and be able to attend scheduled meetings in-person or by conference call.

Applicant Name	
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Statement of Interest

Use the space below to share why you are interested in being in a board position on the Oregon State Weed Board. *You may complete this section on a separate sheet.*

Professional Experience/Background

Please describe any work experience and/or involvement that has provided you with knowledge, skills, or abilities to successfully represent the Oregon State Weed Board. *A current resume may be substituted for this section.*

Applicant Name	
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Background Information

Are you currently serving on a state board or commission other than this one? ☐ Yes ☐ No
If yes, please list:

Please list all organizations in which you have held memberships and the number of years.

Conflicts of Interest

Please identify any potential conflicts of interest you may have by serving on this board.

Applicant Name	
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References

Please identify two references that may be contacted if you are selected as a top candidate. Individuals or representatives of associations/organizations are acceptable.

Reference #1

Name					
Affiliation					
Mailing Address					
City		State		Zip	
Phone Number		Cell or Alternate Number			
Email					

Reference #2

Name					
Affiliation					
Mailing Address					
City		State		Zip	
Phone Number		Cell or Alternate Number			
Email					

Applicant Name	
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To assist us in meeting affirmative action objectives, we would appreciate information about your background. This information is optional and may be used for data collection only. Under state and federal law, this information may not be used to discriminate against you.

Race/Ethnicity: *(Select one)*

- | | |
|---|---|
| ☐ African American/Black | ☐ Hispanic/Latino |
| ☐ American Indian/Alaskan Native | ☐ Native Hawaiian/Pacific Islander |
| ☐ Asian | ☐ Multi/Other |
| ☐ Caucasian/White | |

Gender Identity: _____ LGBTQ: ☐ Disability: ☐ Yes ☐ No

Please send your completed interest form via email (preferred) to: Tristen Berg at tristen.berg@oda.oregon.gov or by postal mail to:

Oregon State Weed Board
Tristen Berg, Noxious Weed Grant Coordinator
Oregon Department of Agriculture
635 Capitol St NE
Salem, OR 97301
541-604-6580

Interest forms must be completed and returned by email or post-marked by 9/29/26 to be considered.