



**NOMINATIONS CALIFORNIA SUSTAINABLE SEAFOOD INITIATIVE**

Please complete entire form.

**Your name:** \_\_\_\_\_

**Company/Organization:** \_\_\_\_\_

**Your email and phone #:** \_\_\_\_\_

**Name of nominee:** \_\_\_\_\_

**Company/Organization:** \_\_\_\_\_

**Has this person been informed that you are nominating them and are they willing to serve?**  
\_\_\_\_ YES    \_\_\_\_ NO

**For which group/category are you nominating this person to represent on the California Sustainable Seafood Initiative?** (Place an X next to all that apply)

- \_\_\_\_ Commercial fishing
- \_\_\_\_ Fish processor, trader, or retailer
- \_\_\_\_ Scientific community
- \_\_\_\_ Non-governmental organization
- \_\_\_\_ Fishery manager
- \_\_\_\_ Restaurateur
- \_\_\_\_ Public health or nutrition official
- \_\_\_\_ Fishing port official
- \_\_\_\_ other (please describe)

**Contact information of nominee:**

Email address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Address: \_\_\_\_\_

**Please describe in more detail:**

Why is this person a good representative of the category or categories noted above?  
How will this person contribute to the development of useful and credible recommendations for the California Sustainable Seafood Initiative?

**Please copy and paste this entire application form into an email. Please submit all completed nomination forms via email to [vtermini@scc.ca.gov](mailto:vtermini@scc.ca.gov) by 5 p.m. February 11, 2010.**