

Affiliate Annual Report for Calendar Year 2024

To maintain compliance with IAFP Constitution and Bylaws, Affiliates must return this completed report. Please send by email to Susan Smith at: ssmith@foodprotection.org.

Hungarian Association for Food Protection

1. Your Official Delegate to IAFP Affiliate Council and Contact

Enter in the fields below the information requested for your Association's official Delegate to the IAFP Affiliate Council and your official Contact for IAFP correspondence. **Delegate must be an IAFP Member**.

Official Delegate to IAFP Affiliate Council

Dr. Gabriella KISKÓ
Hungarian University of Agriculture and Life Sciences, Institute of Food Science and Technology, H-1118 Budapest, Somlói út 14-16, Hungary +36-1-3057610
kisko.gabriella@uni-mate.hu
IAFP Member? Y ☒ N ☐

Official Contact for IAFP Correspondence (indicate "same" if person also serves as Delegate)

Dr. Csilla MOHÁCSI-FARKAS

Hungarian University of Agriculture and Life Sciences Institute of Food Science and Technology Somlói út 14-16.,

Budapest, H-1118, Hungary

+36-1-350-7202

Mohacsine.Farkas.Csilla@uni-mate.hu

IAFP Member? Y ☒ N ☐

2. Membership List

- a. Indicate the current total number of members in your Association: 16
- b. How many NEW members joined your Association in 2024? 0
- c. Fax or email your current membership list. Include name, title, complete address, phone number, fax number, and email address of all active members.

3. Meetings: Annual Meeting/Conference, Educational, Workshops, Webinars, etc.

- a. On what date(s) was your most recent general membership or major meeting (i.e., Annual Meeting/Conference) during the past year? Please list number of attendees.
- b. Please provide the date(s) and location of your next scheduled major meeting (i.e., Annual Meeting/Conference): 15 May 2025.
- c. List all other general membership meetings held in 2024 (excluding board meetings). Include title, dates and attendance numbers.

Name of Meeting	Date(s) Held & # of Attendees
Name of Meeting	Date(s) Held & # of Attendees

4. Awards and Scholarships

a. List members honored with an award from your Association and/or IAFP during 2020. Include name of award and qualification for award.

Click here to type recipient's name	Name of Award and how did recipient qualify?
Click here to type recipient's name	Name of Award and how did recipient qualify?

b. List scholarships awarded during 2020; include recipient and qualification for scholarship.

Scholarship Name/Amount	Recipient Name and how did recipient qualify?
Scholarship Name/Amount	Recipient Name and how did recipient qualify?
Scholarship Name/Amount	Recipient Name and how did recipient qualify?

5. Web Communication

Please be sure to keep the IAFP office on your mailing list for newsletters, email, and other communications to your general membership.

Please provide your existing Affiliate's Web site address <u>AND</u> date last updated: enter Web address here and last update

Did you launch a <u>new</u> Affiliate Web site in 2020? Y □ N ⊠

Attachment A (completion required)

Association Officers List

Provide the contact information requested below for all current officers of your Association. Please indicate if each officer is an IAFP Member (reminder: Your President and Delegate are required to be IAFP Members). The information you provide here is published on our website and in select membership materials. The information may be typed in the fields below or may be sent to our office by email, fax or regular mail.

Officer Title

Indicate the term dates (e.g., 2024–2025) for your current Executive Board: 2024-2025

President	Officer Name
Dr. Csilla Mohácsi-Farkas	Address 1
Somlói út 14-16.	Address 2
Address 2	
Budapest, H-1118 Hungary	City, State ZIP Country
+36-1-350-7202	Phone Number
	E-mail address
Mohacsine.Farkas.Csilla@uni-mate.hu	IAFP Member? Y □ N □
IAFP Member? Y ⊠ N □	
	Officer Title
Vice president	Officer Name
Dr. Gabriella Kiskó	Address 1
Somlói út 14-16	Address 2
Address 2	City, State ZIP Country
Budapest, H-1118 Hungary	Phone Number
+36-1-350-7010	E-mail address
Kisko.gabriella@uni-mate.hu	IAFP Member? Y □ N □
IAFP Member? Y ⊠ N □	in the monitor. The six is
	Officer Title
Secretary and Treasurer	Officer Name
Dr. Tekla Engelhardt	Address 1
István utca 2.	
Address 2	Address 2
Budapest, H-1078 Hungary	City, State ZIP Country
+36-20-469-9715	Phone Number
	E-mail address
teklaengelhardt@gmail.com	IAFP Member? Y □ N □
IAFP Member? Y ⊠ N □	
	Officer Title
Officer Title	Officer Name
Officer Name	Address 1
Address 1	Address 2
Address 2	City, State ZIP Country
City, State ZIP Country	Phone Number
Phone Number	E-mail address
E-mail address	IAFP Member? Y □ N □
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