

Please select one

Internship \_\_\_\_\_

Mentorship \_\_\_\_\_

Incubator \_\_\_\_\_



# Hands-On Module Application

This material is based upon work that is supported by the National Institute of Food and Agriculture, U.S. Department of Agriculture, under award number 2015-70017-22861.

**Beginning Farmer Rancher Development Program**

**Developing the Next Generation of Sustainable Farmers in Georgia Grant**



<b>Name</b>	
<b>Address</b>	
<b>Contact</b>  <b>Emergency Contact</b>	Phone: _____ E-mail: _____  Phone: _____ E-mail: _____
<b>How much time can you commit to the Hands-On Module?</b>	Part Time (20 hours +) _____ Full Time (30 hours +) _____
<b>Can you commit to the following hours based upon your program interest?</b>	Internship (20 hours weekly) _____ Mentorship _____
<b>What is the current status of the business you want to develop with the Hands-On Module?</b>	Planning stage _____ Start-up (in business less than a year) _____ Existing/Operating _____
<b>How did you hear about this program?</b>	_____ TV or Radio _____ Georgia Organics Conference _____ Newspaper Agency _____ Extension _____ Presentation _____ Internet – Where: _____ _____ Other: _____
<b>Have you taken the business course taught by AgSouth or the Small Business Development Center (SBDC)?</b>	_____ Yes _____ When _____ Check All That Apply (_____ AgSouth _____ SBDC) _____ No
<b>What agricultural skills do you have?</b>	Check all that apply: <input type="checkbox"/> Tractor operation <input type="checkbox"/> Equipment maintenance <input type="checkbox"/> Planting work <input type="checkbox"/> Harvest work <input type="checkbox"/> Packaging/Post-harvest Handling <input type="checkbox"/> Gardening <input type="checkbox"/> Paperwork <input type="checkbox"/> Professional driving <input type="checkbox"/> Inspection services or quality control <input type="checkbox"/> Foreman <input type="checkbox"/> Production manager <input type="checkbox"/> Construction <input type="checkbox"/> Welding <input type="checkbox"/> Electrical repair <input type="checkbox"/> Product sales <input type="checkbox"/> Grew up on a farm <input type="checkbox"/> Other: _____
<b>Explain your interest in the Hands-On Module.</b>	Start my own farm _____ Improve my own farm operation _____ Obtain a better job in agriculture _____ Obtain a better job outside of agriculture _____ Other reason – Specify: _____
<b>Production interest (for placement purposes)</b>	Conventional _____ Certified Organic _____

<b>What is your ability/willingness to take on risk?</b>	(Circle one) 1 2 3 4 5
<b>Do you have access to working capital and/or credit?</b>	Yes or No
<b>Do you have access to farmland?</b>	Yes or No
<b>Do you have access to farm equipment?</b>	Yes or No

Do you have any experience in agriculture? Please describe it.

---

---

---

---

---

---

---

---

---

---

Why are you interested in pursuing farming as a livelihood? How does running an agricultural operation fit in with your overall life goals?

---

---

---

---

---

---

---

---

---

---

What is your agricultural experience in terms of legal, business, marketing, and production?

---

---

---

---

---

---

---

---

---

---

Where would/do you market your produce?

---

---

---

---

---

---

---

---

---

---

What are you looking for in a hands-on experience?

---

---

---

---

---

---

---

---

---

---

What crops or products do you have an interest in producing?

---

---

---

---

---

---

---

---

---

---

Are there specific farmers you would like to work with? Please name them.

---

---

---

---

---

---

---

---

---

---

Please explain the gaps and/or needs in your current resource and support network.

---

---

---

---

---

---

---

---

---

---

What challenges do you anticipate in taking the JFCP? Explain how you will overcome those challenges in the space provided below, such as managing time, goal planning, crop planning, farm planning, etc.

---

---

---

---

---

---

---

---

---

---

**APPLICANT MUST SIGN AND DATE**

I apply for participation in the Hands-On Module offered by the Journeyman Farmer Certificate Program (JFCP). I confirm that the information I have provided in this application is accurate and complete. If chosen as a JFCP participant, I will comply with all JFCP requirements, beyond enrollment, as specified by JFCP, including attendance and completing evaluations. I understand that JFCP regularly evaluates JFCP through reviewing student performance and asking students to complete surveys. I will participate in these surveys. I understand that JFCP will protect my information as required by applicable law. I understand and agree that survey and informational materials may be sent to the mailing address I have given above. I also understand that JFCP may film, photograph, and interview JFCP participants during the course of the Program. I will cooperate with these activities and I consent to the use of my image and voice by JFCP. I understand that all video, photographic, audio, written and other materials produced by JFCP will be the sole property of JFCP and may be made available by JFCP to third parties on its website, in its publications or through other media, as it may determine.

JFCP prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program.

---

Signature

---

Date

Upon notification of acceptance into the JFCP Program, participants will be required to sign a Release of Liability form.