

Primary Application

(Applicants are allowed to apply as a single person, or as business partners. The “partner” application follows this one, and must be completed if more than one person is applying. Two people can attend but they must work on only one business plan.)

Please pay your \$50 deposit separately by mailing a check with the application OR paying with a credit card online at estore.learn-growconnect.org/sfbapply or over the phone: 815-389-8455. Email farmertraining@learn-growconnect.org with any deposit questions.

Primary Applicant Contact Information

Name:

Farm Name (if applicable):

Address:

City:

State:

Zip:

County:

Email Address:

Preferred Phone:

Check one: Home Work Cell

Are you a military veteran? Yes No

Will a family or business partner attend SFB with you? Yes No

If YES, please have partner complete a Partner Application (enclosed).

Partner's Name:

Partner's Relationship to you:

Is your partner a military veteran? Yes No

(If you need more space than provided, please attach additional sheets.)

1. How did you hear about Stateline Farm Beginnings?

2. Why are you interested in farming?

Stateline Farm Beginnings®

Year 15: 2019-2020 Program Application

3. How long have you been interested in farming?

4. Provide a brief summary of the school(s) you have attended and your work experience including your two most recent occupations (include current job).

5. Are you currently farming? (For the purposes of this application, “farming” can include starting a farm, transitioning an existing farm from conventional to sustainable, and/or working as a manager, employee or intern on someone else’s farm.)

Yes No

6. Please summarize any current or past agricultural work/jobs.

7. Please list the agricultural classes, conferences, or trainings you have participated in, including the year in which they took place.

8. If you have no experience in farming, please describe any experience you have related to gardening or raising animals.

9. Do you understand that Stateline Farm Beginnings is a farm business-planning program? In other words, while you will have access to all Upper Midwest CRAFT farm field days where you will tour farms with a focus on production topics (see info packet or web page for descriptions), we do not specifically teach you HOW to farm, but rather how to plan and launch a farm business.

Yes, I understand No, I do not understand

10. What do you see as your biggest obstacle in starting your own farm operation?

Stateline Farm Beginnings®

Year 15: 2019-2020 Program Application

11. Indicate the areas you are specifically interested in working on during the Stateline Farm Beginnings® winter course sessions. Check all that apply:

- Financial management
- Business planning
- Marketing
- Legal issues and regulations
- Exposure to sustainable agricultural businesses
- Networking with other farmers
- Quality of life issues
- Lowering production costs
- Other (please list)

12. What farming enterprise (s) are you considering? **If you check more than two, please circle your top two considerations.**

- dairy
- beef
- sheep
- goats (dairy)
- goats (meat)
- hogs
- poultry (meat)
- poultry (eggs)
- vegetables
- flowers
- bees/honey
- agri-tourism
- fruit
- grains
- other (please list)

13. After completing the Stateline Farm Beginnings® program, when do you anticipate starting your farm business?

- I am already selling product
- Within 1 year
- 2-3 years
- 4-5 years
- More than 5 years

14. The 2019-2020 Stateline Farm Beginnings® program includes a one-on-one mentorship with an experienced farmer during the 2020 growing season. Are you able to participate in this mentorship? (Time commitment is flexible.)

Yes No

15. Please share any questions, concerns or comments you have about the Stateline Farm Beginnings® program.

16. Please list one personal and one professional reference. (Name, relationship, phone, and email only.)

Stateline Farm Beginnings®

Year 15: 2019-2020 Program Application

Partner Application

(This section only applies to those applying as 2 people representing one business.)

Partner Contact Information

Name:

Farm Name (if applicable):

Address:

City: State: Zip:

County:

Email Address:

Preferred Phone: Check one: Home Work Cell

Are you a military veteran? Yes No

Primary Applicant's Name:

Primary Applicant's Relationship to you:

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2. Why are you interested in farming?

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Year 15: 2019-2020 Program Application

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- | | |
|--|--|
| <input type="checkbox"/> Financial management | <input type="checkbox"/> Networking with other farmers |
| <input type="checkbox"/> Business planning | <input type="checkbox"/> Quality of life issues |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Lowering production costs |
| <input type="checkbox"/> Legal issues and regulations | <input type="checkbox"/> Other (please list) |
| <input type="checkbox"/> Exposure to sustainable agricultural businesses | |

Stateline Farm Beginnings®

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