



## *Farmers Outreach Program Application*

**Please check the box of the program you are applying for:**

Veterans and Small Farmers Outreach    Beginning Farmers & Ranchers

**Instructions:** Fill the following form in PRINT writing. Failure to provide information requested on this application form may result in processing delays. Providing false information will automatically disqualify you from the program. **This form may be submitted in person or mailed to FIU Farmers Outreach Program, Agroecology Lab, ECS 157, MM Campus, Miami FL 33199.**

### **Personal Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Primary Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell:  Home:  Office:

Primary Email Address: \_\_\_\_\_

### **Emergency Contact Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Primary Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell:  Home:  Office:

Primary Email Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

## Eligibility

**Please check the box that applies to you:**

- I am a U.S Citizen.                       I am a permanent U.S Resident
- I am a U.S Naturalized Citizen    I am none mentioned, but have a work permit
- Other: \_\_\_\_\_

## Demographic Information

*This information will be used for statistical purposes only, and it WILL NOT be used as criteria for selection for this program. Your responses will be confidential.*

**Ethnicity:** (Check One)

- Hispanic or Latino                       Not Hispanic or Latino

**Race:** (Check All That Apply)

- Caucasian                       Black or African American                       Asian
- American Indian or Alaska Native    Native Hawaiian or Pacific Islander
- Other: \_\_\_\_\_

**Sex:**

- Male     Female

**Disability Status:** (Check if applicable)

- Individual with a Disability    Not applicable

**Reasonable Accommodation:** (Explain what type of accommodation you might need.)

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**Are you a Veteran of the U.S. Armed Forces?**    Yes       No

### **Additional Information**

**Do you own a car or have access to transportation to different areas of Southeast Florida and/or The Redland Agricultural Area of Miami-Dade?**

Yes     No

**Estimated hours you are willing to commit per week to the Program (minimum of 5)?**

**Hours**

**In the case you are not admitted to our paid apprenticeship, would you be interested in volunteering with our program?     Yes     No**

**Are you available to attend our monthly workshops in areas such as The Redlands Agricultural Area of Miami Dade?     Yes     No**

### **Previous Farming Experience**

**Check all that applies:**

- No farming experience, but thinking of starting my own farm
- Farming experience as a farm worker, but thinking of starting my own farm
- Farmer with less than 2 year experience
- Farmer with 2 to 5 year experience
- Farmer with 5 to 10 year experience
- Farmer with over 10 year experience

### **Farming Interests**

**Please select all of the areas in which you would like to receive training:**

- Fruits     Vegetables     Poultry production     Honey Production     Nursery
- Organic Agriculture     Ornamental Plant Production     Market     Compost
- Agri-business     Other: \_\_\_\_\_ (please write)

**Please Use The Space Provided To Answer The Following Questions**

*Please briefly describe your potential future plan for agricultural operation (include size, crops, location, etc.):*

*In the best of scenarios, please provide an estimated timeline for the start of your farming or agri-business operation:*

**I, \_\_\_\_\_, certify that all of the information indicated in this application is correct, and I agree to abide by the rules and responsibilities of the FIU Farmers Outreach Program.**

Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Printed Name: \_\_\_\_\_