

AMERICAN Agriculturist®

MID-ATLANTIC MASTER FARMER APPLICATION FORM

The Mid-Atlantic Master Farmer Award is sponsored by *American Agriculturist* magazine in cooperation with the Cooperative Extension offices of the Cooperative Extension Offices of Delaware, Maryland, New Jersey, Pennsylvania and West Virginia.

Submitting a nomination

If you are filing an application on behalf of a nominee or if you are nominating yourself, please fill out the application in its entirety and mail it to:

American Agriculturist
P.O. Box 734
Richland, PA 17087

You can also email your completed application to chris.torres@farmprogress.com. For more information or if you have any questions, contact editor Chris Torres at the above email or call (717) 679-2677.

The nomination process

Completed applications are due no later than **February 1**. A four-person judging committee will evaluate the nominations and judge each candidate by the middle of March. Winning candidates will be contacted in late March or early April.

The requirements

Along with a completed application, each nominee should provide a minimum of **four** letters of recommendation. These letters can come from other farmers, bankers, veterinarians, nutritionists, Extension personnel, community leaders or others who can attest to the nominee's qualifications for the award. News clippings and photos can also strengthen the application.

The award

The Master Farmer Award is the most prestigious honor bestowed to a farmer. Less than 1% of all farmers in the Mid-Atlantic region have been recognized as Master Farmers. Winners of the Master Farmer Award will receive a plaque and will be invited to attend the Mid-Atlantic Master Farmers banquet this summer.

Information provided on this form will be used only in the selection of Master Farmers of the Mid-Atlantic. It will be held in strictest confidence and will not be made public without the candidate's permission. Only our judges see the financial information.

Nominee's Name(s)

Application Type: Individual Husband/Wife Partnership Siblings

Address _____

City _____ State _____ Zip Code _____

County _____ Phone Number (_____) _____

E-mail _____

I affirm the accuracy of the information provided in this worksheet.

Signature _____

A: The Candidate(s)

1. Please give a brief biography of yourself (co-applicants, please provide separate biography). Don't include farm history here:

2. Please provide level of education in the box below.

Education	Course of Study/Degree	Check completed year
H.S.:		9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>
College:		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
Trade School/Other:		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>

Co-applicant

Education	Course of Study/Degree	Check completed year
H.S.:		9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>
College:		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
Trade School/Other:		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>

3. Describe members of the family, whether they are involved in the operation or not. If married, please include spouse's name:

4. How many years have you been farming and how did you get started in the business:

5. What are your personal goals for the next 5 to 10 years:

6. Give three reasons why you think you are a viable Master Farmer candidate:

B: THE FARM

1. Farm Name:

2. Farm is operated as a: Sole Proprietorship Corporation
Partnership Combination

Name of partner(s) or major shareholder(s): % Interest

3. Please detail your farmland uses: Acres Owned Acres Rented

Cropland

Pasture

Woodland

4. Please check any of the following agronomic practices being used:

- Soil testing
- Contour strips/terraces
- Nutrient management plan
- Conservation plan
- Forage testing
- No-till
- Integrated pest management
- Reduced tillage
- Sod waterways
- Other Please specify:

5. CROP PRODUCTION:

Crops	Present Acreage	Farm Yield Average		Management strategies and/or innovations
		5-year Average	Best Yield Ever	
Forages				
Grains				

Fruits and vegetables				
Other crops				

6. Describe your overall cropping program and philosophy, as well as technological and management advances you've made over the past 5 years and how they've helped you meet your goals:

7. LIVESTOCK PRODUCTION

Type of animal	Numbers	Breed	Annual Production/Performance

8. Describe your animal production practices and philosophy, as well as technological and management advances you've made over the past 5 years and how they've helped you meet your goals:

9. Describe your livestock production facilities, enterprise records and markets. Note any innovative or exemplary aspects of the enterprise(s):

10. What major challenges or disasters have you had to overcome during your years of farming:

11. What are the challenges you will likely face in the future and how do you expect to tackle those challenges:

12. Do you have a written farm business transfer plan? Please explain the process of the transition and how you executed this plan. Include any resources that helped you with the farm transition:

13. What efficiency improvements have you made in your business in the past 5 years:

14. Please provide any additional comments (or documents) demonstrating your financial progress over your career:

15. Do you derive any income from off-farm sources? If so, what's the percentage of your overall income:

C: Organizational and Community Involvement

Past and present memberships:

Memberships	Office Held (check)				
	Pres.	V. P.	Sec.	Treas.	Other
Farm Organizations					

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Community Organizations	Pres.	VP	Sec.	Treas.	Other
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Religious Organizations	Pres.	VP	Sec.	Treas.	Other
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fraternal Organizations	Pres.	VP	Sec.	Treas.	Other
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Service Clubs	Pres.	VP	Sec.	Treas.	Other
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

1. What public offices have you held, if any:

2. What honors or awards have been bestowed on you:

3. Tell us about some of your hobbies or interesting things that you do besides farming:

D. References and Input Suppliers

CREDIT REFERENCE 1

Name _____ Title _____

Institution _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Email _____

CREDIT REFERENCE 2

Name _____ Title _____

Institution _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Email _____

YOUR TOP 5 BUSINESS/FARM INPUT SUPPLIERS

Contact person _____ Institution _____

Location _____ Phone (____) _____ Email _____

Contact person _____ Institution _____

Location _____ Phone (____) _____ Email _____

Contact person _____ Institution _____

Location _____ Phone (____) _____ Email _____

Contact person _____ Institution _____

Location _____ Phone (____) _____ Email _____

Contact person _____ Institution _____

Location _____ Phone (____) _____ Email _____