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Farm Beginnings® Application Form

Please Complete and Return with a \$50 Deposit – Make checks out to UNL

Name: _____

Address: _____ City: _____

State: ____ Zip: _____ Email Address: _____

Phone: (h) _____ (w) _____ May we call you
at work?

Best time to call:

How did you hear about FARM BEGINNINGS®?

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

Why are you interested in farming?

Provide a brief summary of the school(s) you have attended and your work experience,
including any agricultural jobs, training, or experience you have had, if any:

What are you currently doing?

What are your future goals and how do you think this program can help you?

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

Indicate the areas you are specifically interested in working on throughout the Farm Beginnings™ course. Check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> Financial management | <input type="checkbox"/> Sustainable Agricultural practices |
| <input type="checkbox"/> Business planning | <input type="checkbox"/> Livestock production |
| <input type="checkbox"/> Alternative marketing | <input type="checkbox"/> Quality of life issues |
| <input type="checkbox"/> Environmental Monitoring | <input type="checkbox"/> Lowering production costs |
| <input type="checkbox"/> Management intensive grazing | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Organic farming | _____ |

What farming enterprise (s) are you considering?

- beef sheep goats dairy hogs crops vegetables fruits
 flowers other _____

Are you interested in/able to participate in a part/full time mentorship? Yes____ No_____

Other questions or considerations about the program?

Two references: 1 work and 1 personal- List names, addresses, and phone numbers
Please indicate which reference is work and which is personal.