Massachusetts Department of Agricultural Resources

Exploring the Small Farm Dream

###### COURSE APPLICATION

#### PARTICIPANT INFORMATION

*Please note that this program is intended for applicants living in and planning to farm in Massachusetts.*

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| Name(s): |
| Name of Enterprise (if any): |
| Address: |
| Phone: |
| Email: |

**YOUR CURRENT FARMING STAGE**

**(**Check the one that best describes you)

|  |  |
| --- | --- |
|  | I/we are *thinking about* starting a small farm business. |
|  | I/we are *actively planning* to start a small farm business within the next year or two. |
|  | Other (*please describe*): |

#### YOUR FARMING & BUSINESS BACKGROUND

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| Describe your agricultural experience, if any. |
| Have you ever been self-employed? If yes, describe. |
| Describe any previous occupations and educational experience you feel may help you start a farm? |
| List any other agricultural programs or groups you are involved in (Ag Commission, MA Dept. of Ag programs, USDA programs, UMass Extension, Locally Grown program etc.) |
| |  | | --- | | Would the applicant be a Historically Underserved Farmer\*? Please check all of the following categories that apply: | | |  |  |  |  | | --- | --- | --- | --- | | Limited Resource Farmer | Beginning Farmer | Socially Disadvantaged Farmer | Veteran Farmer | | \*Historically Underserved Farmer as defined in the 2018 US Farm Bill. For reference, please see USDA definitions: <https://www.nrcs.usda.gov/wps/portal/nrcs/detail/national/people/outreach/slbfr/?cid=nrcsdev11_001040> | | | | | |

YOUR CURRENT LAND RESOURCES

|  |  |
| --- | --- |
| Do you currently have access to land? | \_\_\_Yes (Complete this section.) |
| \_\_\_No (Go on to next section.) |
| Describe the general location, acreage and type of your available land (tillable, woods, pasture, etc.). | |
| Describe your form of land tenure (i.e., own, lease, rent, other). | |

#### YOUR CURRENT SMALL FARM BUSINESS IDEA

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| --- |
| Briefly describe (1) your *business idea (small farm dream)*, including proposed enterprise(s) (e.g., vegetables, beef, educational programs), marketing strategy(ies) (e.g., farm stand, farmers' market, CSA, sell to restaurants or supermarkets), and *desired or existing location.* |

#### YOUR *EXPLORER* GOALS

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| Please describe what you hope to gain from taking the *Explorer* course. |

#### Return Form to:

**Massachusetts Department of Agricultural Resources**

**Attn: Jessica Camp**

**138 Memorial Ave, Suite 42**

#### West Springfield, MA 01089

#### or by email to [Jessica.Camp@mass.gov](mailto:Jessica.Camp@mass.gov)

Cost for this course is $100 for a single enterprise (you may bring one extra partner for the same fee if space allows). DO NOT SEND ANY MONEY UNTIL WE CONFIRM YOUR REGISTRATION. It is important to us that course fees do not create a barrier to participation.  If the fee would prevent you from participating, please call or email Jessica Camp at 617-823-0871 or Jessica.Camp@mass.gov, and we can discuss waiving the fee.