**2019 Executive Farm Management Program Application**

Please answer these questions to the best of your knowledge.

**\***Required Responses

**General Applicant Information** (\*Required Responses)

1. Name **\*** Click here to enter text.

2. Email Address **\*** Click here to enter text.

3. Farm Name **\*** Click here to enter text.

4. Job Title **\*** Click here to enter text.

5. Farm Mailing Address **\*** Click here to enter text.

6. Business Phone Number **\*** Click here to enter text.

7. Mobile Phone Number **\*** Click here to enter text.

**Farm Profile** (\*Required Responses)

8. Please provide a farm history and summary of the agribusiness you currently own, operate, or manage. **\*** Click here to enter text.

9. When was your operation started? **\*** Click here to enter text.

10. If family owned and operated, how many generations have participated in the operation? **\*** Click here to enter text.

11. If your operation is family owned, how many family members are involved in the business? **\*** Click here to enter text.

12. If your operation is family owned, are you a member of the family? **\***

Yes  No

13. Does your operation GROW in any additional states or countries? If so, in which states or countries and which crops? Please include size in terms of acres. **\*** Click here to enter text.

14. Does your operation EXPORT any of the crops you grow? If so, in what countries and what quantities per crop? **\*** Click here to enter text.

15. Does your operation grow any crops on contract? **\***

Yes  No

If yes, which crops? Click here to enter text.

How many acres per crop? Click here to enter text.

What organizations/operations do you maintain contracts with? Click here to enter text.

**Professional Profile** (\*Required Responses)

16. Are you the most senior manager of your operation? **\***

Yes  No

17. If no, to whom do you report and what is their position in the operation? **\*** Click here to enter text.

18. Please explain your role on the farm. **\*** Click here to enter text.

19. How long have you worked at this operation? **\*** Check all that apply.

Less than 1 year

1 to 5 years

6 to 10 years

11 to 15 years

16 to 20 years

20 to 25 years

More than 25 years

20. How long have you worked in agriculture? **\*** Check all that apply.

Less than 1 year

1 to 5 years

6 to 10 years

11 to 15 years

16 to 20 years

20 to 25 years

More than 25 years

21. List the educational institutions you have attended, beginning with the most recent. (Include high school, colleges, universities, and management programs.) **\***Click here to enter text.

**Personal Responsibilities and Awareness** (\*Required Responses)

22. Describe your experience with the farm's finances. **\*** Click here to enter text.

23. Describe your experience with the farm's HR policies. **\*** Click here to enter text.

24. Do you have experience with the business model canvas? **\***

Yes No I don't know

25. Do you use large amounts of data for decision-making? **\***

Yes No

26. If you answered yes, please provide us additional information about the data that you collect, the sources from which this data is collected, the systems which you utilize to analyze it and how you make decisions based on the data you collect. **\*** Click here to enter text.

**Financial Profile** (\*Required Responses)

27. What is the approximate net asset value of your operation? Click here to enter text.

28. What is your farm operation's total gross annual income? Click here to enter text.

29. Do you have an equity stake in the operation? **\***

Yes, direct equity stake. Yes, indirect equity stake. No I don't know.

30. Which of these apply to your operation? Please check all that apply. **\*** Check all that apply.

Sole Proprietorship

General Proprietorship Partnership

Limited Partnership

Limited Liability Partnership

Public Corporation LLC

Private Corporation Association Cooperative

Other:

31. If you answered the above question with "other" please provide more information. Click here to enter text.

32. What crops and livestock do you produce? How many acres do you produce and/or heads do you raise for each? **\*** Click here to enter text.

33. What components of your operation generate the most revenue? **\*** Click here to enter text.

34. What are the biggest challenges to your operation? **\*** Click here to enter text.

**Labor Profile** (**\***Required Responses)

35. How many people, including you, are actively involved in the management of your farm/ranch business? **\*** Click here to enter text.

36. How many full-time employees (below management level) are involved in your farm? **\*** Click here to enter text.

37. How many seasonal employees (below management level) are involved in your farm? **\*** Click here to enter text.

38. Which of the following positions are formally recognized within your operation? Please check all that apply. **\*** Click here to enter text.

Accounts Payable and Receivable

Business Development

Controller/Financial Officer

Crop Scout and Advisor

Farm Manager

Food Safety

Greenhouse Manager

Human Resources

IT

Logistics

Marketing

Packing Manager

Payroll Manager

Operations

Sales

Warehouse Manager

Other (please provide details) Click here to enter text.

**About You** (\*Required Responses)

39. What do you hope to learn from this program? By providing us this information, we will work to ensure that your priorities are met. **\*** Click here to enter text.

40. Have you spoken with any alum from the previous program? If so, who? **\*** Click here to enter text.

41. Are you able to attend each session of the workshop? **\***

Yes No Maybe

If maybe, please provide additional information Click here to enter text.

42. Do you have a backup that can cover your operational responsibilities while you are attending the program? **\***

Yes  No Maybe

If maybe, please provide additional information Click here to enter text.

43. List any industry groups or organizations you have recently been involved with, beginning with the most current. **\*** Click here to enter text.

44. Do you have a preferred agricultural lender? **\*** Click here to enter text.

45. Would you consent to your name being publicly listed as an alum of the program once you have completed the program? **\***

Yes  No

46. What is the name of your local newspaper? **\*** Click here to enter text.

47. Do you consent to a photo of you during the course of the program being used in future marketing and communication pieces this program may create? **\***

Yes No

48. Do you have any dietary restrictions? **\*** Click here to enter text.

49. Will anyone else from your operation be participating? **\***

Yes NoWe are considering this option, but have not yet identified anyone

50. If yes, please provide the following information for all other participants from your operation;

**Name of participant(s)**, **Email of participant(s)**, **Mobile Phone # of each participant(s)**. Note: Any additional participant(s) from your operation will need to complete an application.

Click here to enter text.

Thank You! We look forward to your participation in 2019.

**Once you have completed your 2019 Executive Farm Management Program Application, please send as an attachment to** [**Margaret Huffman**](mailto:mmhuffm2@ncsu.edu?subject=2019%20EFM%20Application) **and/or** [**Michelle Grainger**](mailto:mgrainger@ncsu.edu?subject=2019%20EFM%20Application)**. They will review your application to ensure completion and confirm receipt. In their confirmation email, they will provide additional information and instructions.**