



## Northeast Organic Farming Association of Rhode Island

*Serving Farmers, Gardeners and Consumers with Education & Outreach*

# Organic Farm Advisee Application

Name: \_\_\_\_\_ Farm Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**1. Are you currently a commercial farmer?**

Is your farm currently certified organic, or are you planning to become certified?

**2. Describe your farming background (experience, education, training, books you have read, workshops or conferences attended, etc.):**

**3. Describe your farm (size, personnel, equipment, crops produced, markets):**

**4. Check areas for which you would like assistance:**

\_\_\_ vegetables

\_\_\_ leafy greens

\_\_\_ herbs

\_\_\_ small fruit

\_\_\_ tree fruit

\_\_\_ seedling production

\_\_\_ greenhouse growing

\_\_\_ soil fertility

\_\_\_ cover crops

\_\_\_ pest and disease control

\_\_\_ weed control

\_\_\_ season extension

\_\_\_ post harvest handling

\_\_\_ marketing of organic crops

\_\_\_ crop rotation

\_\_\_ whole farm planning

\_\_\_ business planning

\_\_\_ organic certification

\_\_\_ record keeping

\_\_\_ other: \_\_\_\_\_

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5. List any specific skills you would like to learn from other farmers:

6. Which of the following results would you like to achieve as a result of participating in this program? (check all that apply)

- To improve the sustainability of your farm
- To increase marketable yields
- Concern for you own or your customer's health
- To make your products more desirable in the marketplace
- To justify charging a higher price for your products
- To produce crops that you can label and market as certified organic, organic, IPM, or chemical-free
- Other:

7. What goals do you expect to achieve as a result of participating in this program?

8. Is there a specific advisor your would like assistance from?

9. Terms and conditions:

1. I agree to complete a summary report of my experience in this program.
2. I agree to hold NOFA/RI, my advisor, and RIDEM harmless for errors and omissions.
3. I understand that participation in this program does not constitute or guarantee compliance with the USDA National Organic Program.

I understand and agree to these terms and conditions.

I attest that I am the owner or operator of a commercial farm or I have plans to begin farming commercially in the near future.

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Sign

Date

Return to:  
NOFA/RI 247 Evans Road, Chepachet, RI 02814

Send questions to [nofari@live.com](mailto:nofari@live.com) or call (401) 523-2653.