



## Veteran Farmer Training Program | Application

This program is exclusively designed and funded for military veterans. Please fill out and return the following application. You may attach another sheet if you need extra space. Please include a copy of your DD 214 Member 4 copy that states your discharge status along with your application.

Please note that an on-farm visit and interview is highly recommended if possible to be considered for the training; however a Skype or webcam interview is also acceptable depending on the circumstances. Based on your application we will determine whether to schedule an interview. If you know you will be in our area this winter, please let us know when you are available for a visit.

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Name: \_\_\_\_\_ M: \_\_\_\_\_ F: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_ Best time to be reached: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

What branch of the military did you serve and what dates? \_\_\_\_\_

*We require interns to commit to at least 2 months to take part in our internship.*

Will you be able to commit to this time frame? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If no, please explain. \_\_\_\_\_

How many months would you be interning? \_\_\_\_\_

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What made you want to farm?



## **Veteran Farmer Training Program | Application**

Why do you want to train at Rodale Institute?

What are three goals you wish to achieve while attending our program?

If you are chosen to attend Rodale Institute for training, what is your vision or goal after completing the training?



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Knowing there are many aspects to being a farmer, all of which will be part of your experience, what interests you the most?

What interests you the least?

What are some of the challenges you anticipate?



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What is a unique trait that you can bring to the farm and fellow co-workers?

What is one quality about you that others may find difficult to work with?

Describe any other skills you have learned. (I.e. carpentry, equipment operation, maintenance, computers, ability to work with others, etc.)

Other considerations:



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### Reference #1

Name/Business: \_\_\_\_\_ Years of Acquaintance: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

### Reference #2

Name/Business: \_\_\_\_\_ Years of Acquaintance: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

### Reference #3

Name/Business: \_\_\_\_\_ Years of Acquaintance: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

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### RETURN TO:

Veteran Farming Program Coordinator

611 Siegfriedale Road

Kutztown, PA 19530

Questions? Call 610-683-1442 or email

Veterans@RodaleInstitute.org.