

MINISTRY OF AGRICULTURE, LANDS & FORESTRY 2021 FARM LABOUR SUPPORT APPLICATION FORM

DATE OF APPLICATION		FARMER REGISTRATION #	
FARMER NAME		DISTRICT East <input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> West <input type="checkbox"/>	
HOME ADDRESS		FARM LOCATION	
SEX Male <input type="checkbox"/> Female <input type="checkbox"/>		CONTACT NUMBER	
FARMING STATUS Active <input type="checkbox"/> Inactive <input type="checkbox"/>		EMAIL ADDRESS	
HAVE <u>YOU RECEIVED</u> FARM LABOUR SUPPORT? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, when?			
WAS THE SUPPORT MAINTAINED? YES <input type="checkbox"/> NO <input type="checkbox"/>			
NUMBER OF YEARS FARMING? 0 – 5 <input type="checkbox"/> 6 – 10 <input type="checkbox"/> More than 10 <input type="checkbox"/>			
LAND TENURE		Owned <input type="checkbox"/> Lease <input type="checkbox"/> Family Owned <input type="checkbox"/> Rent <input type="checkbox"/>	
CROPS GROWN		<input type="checkbox"/> Tree Crops (Nutmeg, Cocoa, Soursop, Coconut) <input type="checkbox"/> Root Crops (specify) <input type="checkbox"/> Vegetables (specify)	
IRRIGATION PRESENT		Yes <input type="checkbox"/> No <input type="checkbox"/> Recommended? Yes <input type="checkbox"/> No <input type="checkbox"/>	
LAND AREA (AC.)		Total Available _____	
FARM LABOUR REQUESTED		Food Security Program <input type="checkbox"/> Tree Crop Rehabilitation <input type="checkbox"/>	
		Tree Crop Establishment <input type="checkbox"/> Tractor Service <input type="checkbox"/> No. Of Days <input type="checkbox"/>	
AVAILABLE LABOUR FORCE		# Men _____ # Women _____	
PLANTING MATERIAL AVAILABLE		Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, type & amount:	

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CROPS CURRENTLY PRODUCED & ACREAGE	Nutmeg <input type="checkbox"/> _____ Cocoa <input type="checkbox"/> _____ Soursop <input type="checkbox"/> _____ Spices <input type="checkbox"/> _____ Avocado <input type="checkbox"/> _____ Banana <input type="checkbox"/> _____ Root Crops <input type="checkbox"/> _____ Staple Crops <input type="checkbox"/> _____ Other <input type="checkbox"/> _____	
ADDITIONAL COMMENTS (MOAL OFFICER)	_____ _____ _____ _____	
RECOMMENDED	Yes <input type="checkbox"/> No <input type="checkbox"/>	
RATIONALE	_____ _____ _____	
WORK RECOMMENDED	Land Clearing <input type="checkbox"/> Acreage _____ Land Preparation <input type="checkbox"/>	Tractor Service <input type="checkbox"/> # Days _____
ASSESSING OFFICER	<i>(Print Name)</i>	<i>(Signature)</i>
		<i>(Date)</i>

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2021 FARM LABOUR SUPPORT TERMS & CONDITIONS

1. Beneficiaries **MUST** be registered farmers, in good standing.
2. The support previously provided by the program will **NOT** be repeated, if it has not been maintained.
3. The time allotted to each beneficiary will be determined after assessment by the Extension Division and **MUST** be adhered to.
4. Plants **MUST** be purchased in advance for the establishment of new plots.