

Partner Organization Plot Application

Organizat	ion's Informatio	on				
Name of O	vacai=ation.					
Name of Organization: 501(c)3 Non-Profit Status:						
Community served by your						
organizatio						
Address:						
	Street Address					Apartment/Unit #
	City				State	ZIP Code
Phone:						
FIIOHE.						
Email:						
Name of C						
	ontact Person*:					
between the	partner organization	 requires that each orgar and PFC. This person is re unity with PFC. This person 	esponsible for sharing in	nformation from I	PFC with their of	community and for
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Farm Infor	mation					
Please an	swer the followin	g questions. Please	attach additional pa	ages if vou ne	eed more sp	ace.
		<i>5 1</i>	,	,	,	
		ition want to be accept d farming project?	ed into this program	n? What are y	our organiza	tion's short and long
2) How m	wah aaraa ga daa		nt to form? I lo to o	half agra is a	و ماطوانور	organization
2) HOW III	luch acreage does	s your organization wa	ini io iaini? Op io a	nan-acre is a	valiable per c	nganization.
3) How w	ill your organizati	on's participation at PF	C serve individuals	or communitie	es in need?	

4) What agricultural skills and experience are held within your organization?							
5) What tools, resources, and funding are available within your organization to support your proposed farming project to ensure its success?							
6) How many hours per week is your organization willing to commit to your farming endeavor?							
o) From many nours per week is your organization willing to commit to your farming chacavor:							
7) What is your communication plan for your community? How will you share regular communication from PFC to your community's farmers (and vice versa)?							
8) How many hours per week is your community liaison/leader able to commit to your communication plan and PFC meeting expectations? (PFC estimates 2-3 hours per week or 10 hours per month for these duties)							
9) How will your community support your designated community liaison/leader? (For example, will you raise funds to compensate them for their time?)							
10) Are there youth (ages 14-21) in your community that would be coming to the farm? If so, would your organization be interested in participating in a Summer Youth Employment Program?							
11) How will your community members get to and from the farm?							

12) How many of you	r community members do you expect will be involved in the farm?		
D		Б.	
Representative's		Date:	
Signature:			

Questions? Contact Beth Leipler at 716-536-9088 or email providencefarmcollective@gmail.com

Please email or mail your application form and any additional materials to:

ProvidenceFarmCollective@gmail.com

Providence Farm Collective 5701 Burton Rd. Orchard Park, NY 14170

Applications are due to Providence Farm Collective by December 1, 2021.