



CALIFORNIA FARM BUREAU FEDERATION

2011 Leadership Farm Bureau

Deadline: October 15, 2010

Application Instructions

Thank you for your interest in the Leadership Farm Bureau program. Please follow these simple steps when you complete the application. Applications are also available online at www.cfbf.com.

1. Applicants must be a current member of a county Farm Bureau. Priority will be given to applicants in production agriculture and agribusiness. There is no limit as to the number of candidates a county can submit. Farm Bureau employees may be considered based upon space availability.
2. It is the responsibility of the applicant to insure all components have been received by **October 15**.
3. If additional space is needed to answer a question, attach a separate sheet.
4. The county president recommendation form and personal character recommendation form must be submitted by each person making a recommendation and are due by **October 15**. Return completed forms to:

Leadership Farm Bureau
California Farm Bureau Federation
2300 River Plaza Drive
Sacramento, CA 95833

5. There is a \$250 program fee. The fee is due by the first class in February. Checks are to be made payable to "California Farm Bureau - LFB."
6. The selection committee will base its selection of participants on information obtained from the application, submitted recommendations and a personal interview.
7. Questions should be directed to: Danielle Rau, Director of Leadership Development, (916) 561-5598, drau@cfbf.com

* All Applicants must attend a personal interview in Sacramento on the designated interview date in order to be considered.

† Interviews may be rescheduled in extreme circumstances at the discretion of the selection committee.



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Calendar and Dates to Remember

Tentative

2010

- | | |
|--------------------------|------------------------------------|
| October 15, 2010 | Application Deadline |
| November 10, 2010 | Applicant Interviews*†, Sacramento |
| December 2010 | LFB Class of 2011 Announced |

2011

- | | |
|------------------------------|--|
| February 7-9, 2011 | Welcome, Team Building, Sacramento |
| March 14-16, 2011 | Farm Bureau 101, Intro to Lobbying, Sacramento |
| April 11-13, 2011 | Communicating the Message, Sacramento |
| May 16-19, 2011 | Government At Work, Washington, D.C. |
| September 12-14, 2011 | Ag Issues Tour, San Joaquin Valley |
| November 1-6, 2011 | End of the Year Trip, Illinois/Missouri |
| December 3-7, 2011 | Graduation and CFBF Annual Meeting, Reno |

* All Applicants must attend a personal interview in Sacramento on the designated interview date in order to be considered.



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APPLICANT'S NAME: _____

COUNTY: _____

FOR CFBF OFFICIAL USE ONLY

- Application Instructions (1 pg.)
- Overview and Responsibilities Contract (1pg.)
- Application (5 pgs.)
- Employer Consent Form (1 pg.)
- County Presidents Recommendation Form (3 pgs.)
- Personal Recommendation Forms (3 pgs. each)
- Personal Recommendation Forms (3 pgs. each)

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Overview and Responsibilities

- I. Leadership Farm Bureau is a leadership development program sponsored by the California Farm Bureau Federation (CFBF). The program is ideal for members of a county Farm Bureau board of directors and for active Farm Bureau members who wish to develop their leadership skills and become familiar with issues facing California agriculture.
- II. CFBF will provide over 250 hours of instruction. Farm Bureau has set aside significant staff time and resources to provide a program that will not only benefit you personally but the organization and agriculture.
- III. In order for participants to receive the full benefit of the program, a full commitment is necessary and expected. By agreeing to participate in the program a certain level of commitment and behavior will be required.
 - A. Attendance: Leadership Farm Bureau consists of seven (7) classes. It is expected that you will attend all 7 classes unless in the case of an extreme emergency or unforeseen circumstances. If more than one (1) class is missed it will be up to the discretion of CFBF and the members of the seated class to ask you to apply at another time, when your schedule allows.
 - B. Projects: Participants will complete the requirements of the class as given by the LFB coordinator. These will include but are not limited to:
 - End of the Year Report
 - Annual Meeting trade show booth
 - Assist in coordinating class activities or events.
 - Recruit 2 new Farm Bureau members (voting or sustaining)
 - Promote LFB and distribute 3 applications to potential, qualified applicants
 - Attend two county (different county) or state Board Meetings, committee meetings or events sanctioned by Farm Bureau outside your typical area of involvement.
 - All class work as assigned
 - C. Act Responsibly: You are Farm Bureau's representative during your entire time here. People take their cue or form opinions about an organization by our behavior-both at events and on our own time. We want people to have a good time, but it is important that you remember you are representing Farm Bureau.
 - D. Help Each Other: Watch out for and help your fellow classmates.

I have read, understand, and agree to the above.



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Signature

Name

Date



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Application

Please type

Full Name (as shown on driver's license): _____

Mailing Address: _____

City, State Zip: _____

FB Member # : _____ County: _____

Cell Phone # : _____ Secondary Phone # : _____

Email: _____ Date of Birth: _____

Drivers License# : _____ Shirt Size: _____

Spouse's Name (If Married): _____

If applicable, please list the name(s) of any individuals who influenced you to apply: _____

List colleges attended and/or short courses completed:

Name of School	Enrollment Date	Graduation Date	Degree Earned	Major/Minor Field

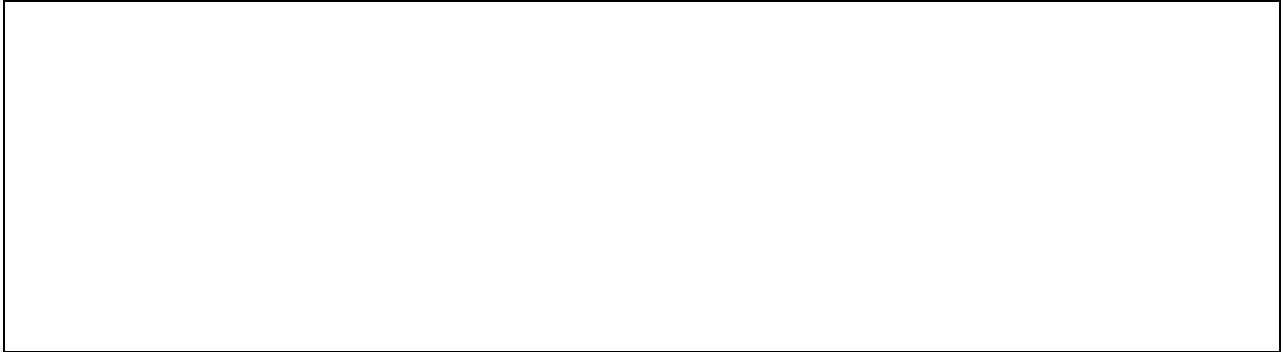
Other educational experiences *(describe)*:



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Military Experience (if any): _____

Branch

Rank

Date of Service

Employment History (list in chronological order with most current first):

Name of Employer	Position Held	Date Employment Began	Date Employment Ended

Describe the production operation or agribusiness you own or are employed by (be as specific as possible and include duties and responsibilities):



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List organizations/groups in which you are or have been a member and the leadership roles you have assumed in each (*mention ag-related and non-ag-related activities*):

Organization/Group	Year	Leadership Role

What do you consider to be your noteworthy accomplishments?



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List awards/honors you have received *(include ag-related and non-ag-related activities):*

Awards/Honors	Year	Basis for Award

What are your leadership strengths and how do they qualify you as an emerging farm leader?
(150 words or less)



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Why do you wish to participate in an agricultural leadership development program? (200 words or less)

List two people you will ask to forward a personal reference on your behalf. *Relatives do not qualify.* These references are in addition to your county Farm Bureau president (or designee).

Name: _____ Phone: (_____) _____ - _____
Address: _____ Occupation: _____

City: _____ State: _____ Zip: _____ County: _____

Name: _____ Phone: (_____) _____ - _____
Address: _____ Occupation: _____

City: _____ State: _____ Zip: _____ County: _____

I have read the Leadership Farm Bureau program description, contract and tentative calendar indicating the requirements for participation in the LFB program and hereby give my permission to contact any of the references responding on my behalf. I understand and agree that any misstatements or omission of materials will result in my disqualification from program consideration and that selection of participants is the responsibility of the LFB selection



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committee. I also understand that selection is limited and if I am not selected this year, I can reapply for the program in the future.

Signature _____

Date _____



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Employer Consent Form

Please type or print clearly

Name of Employer: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone: (_____) _____ - _____

I understand that my employee, _____,

is applying for Leadership Farm Bureau sponsored by the California Farm Bureau Federation. He/She has my permission to participate fully in this seven-month program. I understand that this will require approximately 26 days (the majority of which are weekdays) of mandatory participation from the aforementioned employee.

Signature: _____

Date: _____



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County Presidents Recommendation Form

Please type or attach a typed letter

Note: The county president may designate another member of the board of directors to submit a recommendation on his/her behalf as long as the individual has not been asked to submit a personal recommendation for the candidate.

APPLICANT'S NAME: _____

The Leadership Farm Bureau (LFB) program is designed for those who demonstrate leadership potential in agriculture. *The LFB selection committee requires a recommendation by the county Farm Bureau president before the applicant can be considered.* Please direct your evaluation to the applicant's capability, leadership potential and commitment to agriculture.

Return this completed form by October 15.

IMPORTANT

Please be candid and objective. This evaluation is critical to the selection committee and represents the county Farm Bureau position and attitude toward the applicant's leadership potential. No one other than the LFB selection committee will see this recommendation. It is extremely confidential and will remain with the application on file.

How familiar are you with the applicant? Very Somewhat Not at all

(If you checked "somewhat" or "not at all," please consult with other county leaders who know the applicant well and/or interviewed him/her before completing this form.)



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County Presidents Recommendation Form cont.

Describe the applicant's leadership achievements in Farm Bureau and the community:

In evaluating the following categories, "superior" should be used sparingly and only when truly warranted. "Excellent" is a strong rating; "good," "fair" and "poor" are self-explanatory.

	Superior	Excellent	Good	Fair	Poor
Esteem in which the applicant is held in the community and/or Farm Bureau.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership potential.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall assessment of applicant's leadership potential.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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County Presidents Recommendation Form *cont.*

Additional comments:

Name of Recommender: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____ Phone Number: (_____) _____ -

Signature: _____ Date: _____

The person making the above recommendation must return this completed form by **October 15**.



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Personal Recommendation Form

Please type or attach a typed letter

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Please be candid and objective. This evaluation is critical to the selection committee and represents the public perception and attitude toward the applicant's leadership potential. No one other than the LFB selection committee will see this recommendation. It is extremely confidential and will remain with the application on file.

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Personal Recommendation Form cont.

Describe the nature of your contact with the applicant:

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	Superior	Excellent	Good	Fair	Poor
Esteem in which the applicant is held in the community and/or Farm Bureau.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership potential.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall assessment of applicant's leadership potential.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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Personal Recommendation Form cont.

Based on your contact with the applicant, please state why you believe both the applicant and agriculture would benefit from his/her participation in a leadership development program:

Name of Recommender: _____

Address: _____

City: _____ State _____ Zip _____

County: _____ Phone (_____) _____

Signature: _____ Date _____

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Personal Recommendation Form cont.

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Leadership potential.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall assessment of applicant's leadership potential.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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Personal Recommendation Form cont.

Based on your contact with the applicant, please state why you believe both the applicant and agriculture would benefit from his/her participation in a leadership development program:

Name of Recommender: _____

Address: _____

City: _____ State _____ Zip _____

County: _____ Phone (_____) _____

Signature: _____ Date _____

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