



Growing Forward 2

A federal-provincial-territorial initiative

BC FARM BUSINESS ADVISORY SERVICES PROGRAM

APPLICATION

First Nations Agricultural Opportunities Assessment
2013 - 2017



Agricultural Opportunities Assessments are intended to aid First Nations communities in determining the expected feasibility of agricultural development options. Up to \$5000 worth of service from a qualified advisor is available to complete an agricultural opportunities assessment and/or business planning functions. Work performed by an advisor could include meeting with the community, reviewing the current agricultural resource base and providing a suite of agricultural options with economic analysis showing enterprises most likely to succeed. Access to financial analysis and specialized business planning will enable communities, associated corporations or individuals to make more informed management decisions in agriculture.

PART A—APPLICANT INFORMATION

Please complete the sections below that apply to your organization. (check one in each section)

Section 1 You are applying as:	
<input type="checkbox"/> A community	<input type="checkbox"/> A Tribal Council <input type="checkbox"/> Corporation, partnership, cooperative, or institution
Organization Name (If applicable)	Contact Person

Primary contact for this application:		
First Name	Middle Name	Last Name

Please provide the following contact information:			
Mailing Address		Farm Location	
City/Town/Village	Postal Code	Regional District	
Day Phone #	Alternate Phone #	Facsimile #	Email Address

Secondary contact for this application:		
Name	Phone	Email

File Number (Office Use Only)	
Date Application Received	
Census Division	

Please describe the need for your community to have an Agricultural Opportunities Assessment completed. Why is it important for your community to go through this process?

What is the intended outcome of this process?

Additional support for project:

How will your community support this Agriculture Opportunities Assessment? Please list any in-kind and/or cash contributions from your community to this process (e.g. staff time, donated space for meetings, etc.).

Support Activity	Value (if applicable)

Band Council Resolution or Letter of Support from Leadership attached to application

Is this project part of a larger community agriculture plan, initiative or application? Yes No

If yes, please provide detail on complimentary initiatives and on other funding partners.

PART B– DESCRIPTION OF SERVICE

Please indicate which Specialized Business Planning area(s) are of most importance in your Agricultural Opportunities Business Assessment Project

- | | |
|---|--|
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Business Structure |
| <input type="checkbox"/> Production Economics | <input type="checkbox"/> Risk Assessment |
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Value- added |
| <input type="checkbox"/> Financial Management | <input type="checkbox"/> Business Strategies |

*Funding for each application is limited to a maximum \$5,000

**A project plan including cost estimates is to be included with this application

Name of intended Farm Business Advisor providing services for this application	
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PART C – FARM TYPE AND SIZE

Please indicate those agriculture activities currently in operation in your community.

#	Commodity	Size
	Beef—cow calf	
	Beef—feeder	
	Dairy	
	Hogs	
	Horses	
	Sheep and goats	
	Broiler Hatching Egg	
	Chicken	
	Eggs	
	Other Livestock-specify	
	None Currently	

#	Commodity	Size
	Turkey	
	Blueberries	
	Cranberries	
	Strawberries	
	Raspberries	
	Grapes	
	Tree Fruits	
	Cole Crops	
	Greenhouse	
	Community Garden	
	Agriculture Land Leasing	

#	Commodity	Size
	Potatoes & Vegetables	
	Vegetables-Processing	
	Forage	
	Grain & Oilseeds	
	Floriculture	
	Nursery	
	Ginseng	
	Nuts	
	Mushroom	
	Other Crop-specify	

PART D – DECLARATIONS AND CONSENT TO USE PERSONAL INFORMATION

By submitting this form for benefits under the Ministry of Agriculture Farm Business Advisory Services Program, I/we:

- Hereby declare that the information provided in this application is true and correct in every respect and that I/we have not applied more than once for each Tier 2 Service.
- Authorize the Province of British Columbia, its employees or agents to use the information contained within this application and data relating to my/our farming operation to verify this application and to administer, audit, analyze, evaluate, and improve the *Growing Forward 2* programs administered by the Province of British Columbia and the Government of Canada.
- Acknowledge that I/we am/are British Columbia resident(s) over 19 years of age.
- Understand that failing to comply with all other application requirements may delay the processing of the application, or may make me/us ineligible for receiving assistance under the program.
- Acknowledge that the completion and submission of this application form does not oblige BC Ministry of Agriculture, their agents, servants, and employees to provide funding for the services herein.
- Agree to participate in an evaluation and/or audit of the program.
- Understand that personal information on this form is collected under the Freedom of Information and Protection of Privacy Act, s.26(c).
- The information collected will be used in furtherance of and in a manner consistent with an activity of the public body; that is the Farm Business Advisory Services Program being delivered under the Canada-British Columbia *Growing Forward 2* Framework and Bilateral Agreements.
- If you have any questions about the collection, use and disclosure of this information, contact: B.C. Farm Business Advisory Services Program, B.C. Ministry of Agriculture, 1767 Angus Campbell Rd., Abbotsford, B.C. V3G 2M3 Phone: 250-356-2795 or Toll Free: 1-888-221-7141

PART E - SIGNATURE(S)

Disclaimer: The British Columbia Minister of Agriculture and the Minister of Agriculture and Agri-Food Canada, their officers, servants, and agents accept no responsibility nor will they be held liable for any claims, demands, losses, or actions which may be made or taken against them, rising out of the advice, operation or any other action related to the B.C. Farm Business Advisory Services program.

NOTE - Work started on B.C. Farm Business Advisory Services projects prior to receiving approval from the B.C. Ministry of Agriculture will not be eligible for support under this program.

Dated this _____ day of _____, 20__ at _____, B.C.

Name of Signing Authority, *please print*

Signature of Signing Authority

CHECK LIST - Please ensure you have included the following document with the completed application form:

- A copy of your project plan including deliverables.
- Band Council Resolution or Letter of Support for application.

REFERENCES

Project Deliverable Checklist - First Nations Agricultural Opportunities Business Assessment Projects. For a copy contact BC Farm Business Advisory Services through any of the contacts below.

The TAKING STOCK workbook may be a good reference tool while preparing your project plan. For a printed copy contact BC Farm Business Advisory Services through any of the contacts below. To review online go to:

http://www.agf.gov.bc.ca/busmgmt/FB_Advisory_Services.html

Forward your completed, signed application and supporting documentation to:

By Mail: **B.C. Farm Business Advisory Services Program**
B.C. Ministry of Agriculture
1767 Angus Campbell Rd., Abbotsford, B.C. V3G 2M3
Phone: 250-356-2795 or Toll Free: 1-888-221-7141

By Fax: **604-556-3030**

By Email: BCFBAS@gov.bc.ca

For further information please contact:

B.C. Farm Business Advisory Services Program
Phone: 1-888-221-7141

“Good plans shape good decisions. That’s why planning helps to make elusive dreams come true”

Lester R. Bittel
The Nine Master Keys of Management