

# Government of the United States Virgin Islands Department of Agriculture



ST. CROIX: #1 Estate Lower Love, Kingshill, V.I. 00850 • T: (340) 778-0997 • F: (340) 778-0997 ST. THOMAS: #7944 Estate Dorothea, St. Thomas, V.I. 00802 • T: (340) 774-5182 • F: (340) 774-1823 ST. JOHN: #11 Estate Carolina, Coral Bay, V.I. 00830 • T: (340) 776-6274 • F: (340) 693-5065

### **2020 BEEKEEPING SEMINAR APPLICATION**

Applications for this Beekeeping training may be submitted to the <u>MARKETING DIVISION</u> at VIDA offices or via email at: <u>grants@doa.vi.gov</u> by December 28, 2020 at 11:59pm AST.

Before you begin this application, please read the following information:

- The objective of this program is to enhance the competitiveness of local fruit and vegetable production in the US Virgin Islands through our increased pollination capacity.
- **Eligibility Information:** 
  - Application must be submitted by the deadline (December 28, 2020).
  - Property for perspective colony must be within two miles of a crop producing entity.
- □ **The benefits of completion** of the Beekeeping Seminar include a *Beginner's Beekeeping Kit* and a *Certification of Completion*.

Late applications, applications with missing information, or applications incorrectly submitted will not be considered or accepted.

All **<u>guestions</u>** about this application can be submitted via email to <u>info.doa@doa.vi.gov</u> or via phone at (340) 778-0993.



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### **BEE KEEPING SEMINAR APPLICATION**

#### Applicant Information (please print)

| Name:                |                           |                 |                   |                        |                             |  |
|----------------------|---------------------------|-----------------|-------------------|------------------------|-----------------------------|--|
| Last                 |                           | First           |                   | Middl                  | Middle Initial              |  |
| Is this applicant at | least 18 years old?       | YES             | NO                |                        |                             |  |
| Mailing Address: _   |                           |                 |                   |                        |                             |  |
| Physical Farm Add    | ress                      |                 |                   |                        |                             |  |
| Cell Phone:          |                           |                 | Hor               | ne Phone:              |                             |  |
| Email Address:       |                           |                 |                   |                        |                             |  |
| Questionnaire (p     | lease print)              |                 |                   |                        |                             |  |
| 1. What Beel         | keeping experience do yo  | ou have?        |                   |                        |                             |  |
| 2. Please des        | cribe your interest in Ap | iculture / Beek | eeping?           |                        |                             |  |
| <b>3.</b> Where wil  | l your prospective Beehi  | ve occupy? (che | ck all that apply | ))                     |                             |  |
| () Farm              | () Backyard               | () Near         | School            | ( ) Near a Farm        | () Residential Area         |  |
| ( ) Other:           |                           |                 |                   |                        |                             |  |
|                      |                           |                 | e provided by     | the Cooperative Extens | sion Service and the Virgir |  |
| Islands De           | partment of Agriculture?  | YES             | NO                |                        |                             |  |
|                      |                           |                 |                   | ESTABLISHME            | ENT OF A BEE COLONY         |  |



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- 4. (continued) If not, please state how you intend to address honey production and marketing practices.
- 5. Are you gainfully employed outside of farming? YES NO
- 6. Are you a full or part-time farmer and how much time you are willing to spend on the project?
- 7. How many years of farming experience do you have? \_\_\_\_\_\_ years
- 8. Do you have a valid farmer's license? YES NO
- 9. Do you have outstanding balances owed to the VI Department of Agriculture? YES NOIf so, please state the amount you owe and name the product or services received.
- 10. Please indicate your willingness to sign a cooperative Agreement between the VI Department of Agriculture and yourself if selected as a participant?YESNO

| Questionnaire (p | lease print) |
|------------------|--------------|
|------------------|--------------|

Print Name: \_\_\_\_\_\_

Applicant's Signature: \_\_\_\_

Date:

### SUBMISSION DEADLINE: December 28, 2020 at 11:59pm AST

