



GroupGAP Application

Applicant Information

Applicant Name: _____

Farm Name: _____

Cell Phone: _____ Office Phone: _____

Email: _____

Website: _____

Farm Physical Address: _____

City: _____ Zip Code: _____ - _____

Farm Mailing Address (if same as physical address):

City: _____ Zip Code: _____ - _____

Do you have access to a computer and the internet? Yes No

If yes, are you comfortable communicating via email? Yes No

Do you have access to a smartphone? Yes No

Please rate yourself on your timeliness in response to requests and questions:

I need reminders I respond in a few days I respond right away

Farm Information

Do you own or lease the land that you farm?: Own Lease

Total acres: _____ Acres in production: _____

What crops do you grow?: _____

How many pounds of product have you sold in the last 3 months? _____ Pounds

How many pounds of product have you sold in the last year? _____ Pounds

How long have you been farming? _____ Years _____ Months

Gross Sales: Check the box that corresponds to your gross sales:

\$10,000 or less \$10,000 to 25,000 \$25,000 to 50,000 \$50,000 to 75,000

\$75,000 to \$100,000 \$100,000 to \$150,000 over \$150,000

Number of Employees:

_____ Full-time _____ Part-time _____ Non-Compensated (Family, owners, etc.)

What language(s) do you and your workers speak on the farm?

If needed, do you have access to a translator to help you in this program? Yes No N/A

Producer Practices: Check all of the practices you currently use on your farm.

- Non-certified but practicing organic USDA Certified Organic Fair Trade
- Good Handling Practices Certified Chemical free Certified Naturally Grown
- Integrated Pest Management USDA Good Agricultural Practices Certified

Infrastructure:

Does the farm have a restroom on site for workers to use? Yes No

Does the farm have handwashing facilities available? Yes No

Do you keep records (logs) for any of the following farm activities:

- Pesticide Applications Restroom cleaning Harvest Cleaning Worker Training Sales

What is your farm water source?

- Surface water (ditch) Municipal (county) Well Rainfall only

Sales:

Where are you currently selling your produce?

- Mobile retail (roadside) K-12 Schools Food processors Farmers Markets
- Online sales Restaurants/Caterers Distributors Small local grocery stores Supermarkets
- Buying Clubs Colleges/Universities CSA Other:

Do you intend to expand so that you can sell your product to other institutional markets, such as hospitals and/or schools? Yes No

Do you think GroupGAP will allow you to sell your product to additional outlets? Yes No

Food Safety:

Have you had any food safety training? Yes No

Social Media:

Do you use social media to advertise your farm? Yes No

If yes, what do you use? Facebook ____ Instagram ____ Other ____

If you will share your social media account name(s) with us, please include here:

Facebook: _____

Instagram: _____

Other: _____