## **Eligibility Screening**

- 1. Is the applicant's farm operation located in the state of Virginia? Y / N (N = not eligible and cannot progress)
- 2. Does the applicant attest that she/she is NOT any of the following:
  - American Farmland Trust staff member
  - American Farmland Trust board member
  - A substantial contributor to American Farmland Trust (See definition below)
  - A family member of an American Farmland Trust staff member, board member, or substantial contributor? (See definition below)

Family member: defined as any sibling, spouse, parent, grandparent, child, grandchild, or great- grandchild

Substantial contributor: defined as having given a contribution to American Farmland Trust of \$5,000 or more

Y / N (N= not eligible and cannot progress)

Y to both = applicant "unlocks" the application form and can proceed

# **Regenerate Virginia Healthy Soils Grants Application**

American Farmland Trust (AFT) and the Virginia Soil Health Coalition (VSHC) are proud to announce the inaugural Regenerate Virginia Healthy Soils Grant Program, intended to assist Virginia farmers in implementing innovative and holistic soil health systems.

\*All questions are required unless specified

### **Applicant Information**

- 1. Is this application for an individual farm operation or a group of farm operations?
- 2. Farm Name(s)/Farm Business Entity Name(s) (if different):
- 3. First Name of primary contact for application:
- 4. Last Name of primary contact for application:
- 5. Email of primary contact for application:
- 6. Retype Email:

- 7. Phone Number of primary applicant:
- 8. Personal Mailing Address:
  - a. Line 1
  - b. Line 2
  - c. City
  - d. State
  - e. Zip Code
- 9. Farm Address(es) (if different than personal address):
  - a. Line 1
  - b. Line 2
  - c. City
  - d. State
  - e. If your farm does not have a USPS address, please include its Section, Township or Range.
- 10. Which address would you prefer AFT to use for primary communication?
  - a. Personal mailing address
  - b. Farm mailing address
- 11. Do you own or lease farmland at this address?
  - a. Own
  - b. Lease
  - c. Do not own, but operate family farmland
- 12. If you lease, please explain the terms of your lease agreement (yearly, month-to-month, or otherwise), including what year your current lease extends to and if it is a formal or informal lease agreement.
- 13. Farm website(s) and/or any social media handles (if applicable):

#### Your Farming Situation

- 14. Briefly tell us about the current farming status and land tenure situation (ex: full-time, part-time, hobby/personal use, leasing land, managing a farm, etc.) of the applicant(s)(500-word max):
- 15. Please briefly describe the farming background, training, and experiences of the applicant(s) (500 word max):
- 16. Please describe your current regenerative farming practices, as they relate to soil, water, community, economics, and/or farm inputs and outputs (500 word max):
- 17. Size of farm(s) (total acres of land including cropland, pasture, woodland, and all other land):
- 18. Total acres in cultivation or agricultural use per farm:
- 19. Did you produce food or ag products for your community, to barter or exchange, or sell in the 2023 growing year?

- a. Yes
- b. No
- 20. If no, please state explanation (150 word max):
- 21. What products did this farm operation produce, raise, or grow in 2023 and/or 2024 growing seasons? (Choose all that apply):

☐ Dairy	□ Beef	☐ Sheep/Goats
☐ Swine	□ Equine	☐ Poultry
☐ Other Livestock	□ Fiber	☐ Fruit
☐ Vegetables	☐ Feed grains	□ Nursery
□ Flowers	□ Greenhouse	☐ Forages, hay
☐ Ethnic crops	☐ Seed production	☐ Grains, dry beans, oil seeds for
☐ Aquaculture	☐ Other:	human consumption

22. If you listed other above, please specify your primary product(s):

# Proposed Use of Funds

- 23. Please describe how the proposed project will address one or more of the following principles of soil health in the specific context of your farm operation(s):
  - a. Maximize diversity
  - b. Minimize disturbance
  - c. Maximize soil cover
  - d. Maximize living roots in the soil
- 24. Please briefly share the ways in which you are specifically proposing to use the funds (500 word maximum). Include in your description:
  - a. Specific details about the practices that will be implemented.
  - b. A description of the ways that the project you are proposing will enhance your farm's soil health and your regenerative farming goals.
- 25. Please explain why this project is not a good fit for other funding opportunities (e.g. the Virginia Agricultural Cost Share (VACS) program, Environmental Quality Incentives Program (EQIP), other state or federal cost share, etc.) or how you plan to use a Healthy Soils award as a complement to other funding opportunities.
- 26. Please describe your communication and outreach plan. How will you let others know about this project?
- 27. Do you have a technical consultant or advisor you will be working with on this project (for example, an extension agent, SWCD staff person, crop consultant, etc.)? If so, who? Explain what their role on the project will be.
- 28. Explain how you plan to assess the health of your soil and what changes you will be looking for, especially in the context of the short timeline of the project.

### **Project Cost**

- 29. Grant Amount Requested [\$30,000 maximum for an individual farm, \$50,000 for a group of farmers]:
- 30. Please provide an estimated budget outline for your project (see <u>Excel</u> or <u>Word</u> budget templates if desired):
- 31. If other funds are required, what is the source of other funds?
- 32. Healthy Soils Program funds will generally be awarded according to the following schedule:
  - a. 40% when award letter is signed
  - b. 40% after a 6-month check-in with AFT and/or VASHC staff
  - c. 20% when reporting is completed

How will you ensure that this payment schedule works for your operation?

#### **Timeline**

All work supported by the grant must be completed within two years of the date of the award letter.

- 33. When do you expect that the project will be completed? (*Month / Year*):
- 34. Please provide a brief timeline of proposed project activities:
- 35. If the project cannot be completed within two years, please explain why:
- 36. Are you/are any of the applicants a Beginning Farmer? Years involved in Operating a Farm: (USDA Beginning Farmer Definition)
  - a. No Farming/Ranching 10 Years or more
  - b. Yes Farming/Ranching 6-10 Years
  - c. Yes Farming/Ranching 1-5 years
  - d. Yes Farming/Ranching less than 1 Year
- 37. Please select your age group:
  - a. Under 25 years
  - b. 25-34 years
  - c. 35-44 years
  - d. 45-54 years
  - e. 55-64 years
  - f. 65 years and over
  - g. Prefer not to answer
- 38. With which gender identity do you most identify?
  - a. Man
  - b. Woman
  - c. Transgender/Trans woman
  - d. Transgender/Trans man

f.	Prefer to self-describe:
g.	Prefer not to answer
39 Which	racial and ethnic category best describes you?
a.	American Indian or Alaska Native
b.	
c.	Black or African American
	Hispanic, Latino or Spanish Origin
	Middle Eastern or North African
f.	Native Hawaiian or Other Pacific Islander
g.	White or European
h.	Other (two or more races)
40. How d	lo you describe your sexual orientation or sexual identity (choose all that apply)?
a.	Lesbian
b.	Gay
c.	Bisexual
d.	Queer
e.	Heterosexual
f.	Prefer to self-describe
g.	Prefer not to answer
41 11	
	you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?
	Yes, on active duty now
	Yes, on active duty in the past, but not now
c.	Never served in the military
42. Do vo	u qualify as a limited-resource farmer, using the USDA's online tool for self-determination?
	Yes
	No
0.	
platfoi a.	erstand that all award updates & communication will be done via email and an online rm. Failure to reply may result in loss of award:  Yes
b.	No
Join Us in	Saving the Land That Sustains Us
	applicants have the option to sign up for email updates and action opportunities from AFT, ia Soil Health Coalition, and 4the Soil and receive a complimentary one-year American

e. Non-binary

Farmland Trust membership.

Yes, I wish to receive updates and a complimentary membership from AFT and the VA Soil Health Coalition.	
No, I do not wish to receive updates and a complimentary membership from AFT or the VA Soil Health Coalition.	