

STATE OUTSTANDING TREE FARMER OF THE YEAR CONTEST NOMINATION FORM

STATE _____

YEAR _____

Note: **Print or type all information.** Preliminary judging will be based on this completed form.
Please fill it out concisely and legibly.

Name of Tree Farmer: _____ Tree Farm Number _____

Address: _____

Phone: (_____) _____ E-mail Address: _____

Location of Tree Farm _____

Occupation (if retired, prior occupation) _____

Total woodland acreage _____ Woodland acreage certified as a Tree Farm _____

How long has Tree Farmer owned the land? _____

How long has the land been under a written forest management plan? _____

How long has the property been a certified Tree Farm? _____

What are the primary objectives of Tree Farm (i.e. financial, recreation, wildlife habitat, timber, etc.) _____

How much of the actual Tree Farm field work is done by the owner? _____

How is the rest accomplished? _____

What forest management work has been done in the last five years?

1. Harvesting (type of cut, volume & products) _____

2. Reforestation (natural, artificial and number of acres) _____

3. Other practices (protection and TSI) _____

Has the Tree Farmer been involved in any special activities (i.e. tours, news stories, radio or TV shows, magazine articles)? _____

Is the Tree Farm under the multiple use concept? _____ If so, what uses are allowed? _____

Not allowed? _____

Is the Tree Farm sign in good condition and correctly displayed? _____

In your own words, tell why you feel this is an Outstanding Tree Farmer (how he or she is different from the average Tree Farmer)_____

What, if anything, has this Tree Farmer done to promote Tree Farming? (Examples: used Tree Farm as a demonstration area, participated as a member in state forestry association, promoted Tree Farming to youth groups, influenced other landowners to plant or manage their forest)_____

Does the Tree Farmer belong to any forestry organization, i.e. Forest Farmer, state forestry association, or has he or she received any special awards for forestry efforts (other than Tree Farm awards)?_____

Is or has the Tree Farmer ever been a practicing forester? If yes, which of the above activities were employer-supported and which were truly voluntary and outside his/her scope of duties: _____

Name and affiliation of cooperating forester:_____

Address and phone number:_____

Nominating Forester's Signature:_____

Print Name:_____

Address:_____

Phone: () _____

Email:_____

State Tree Farm Chair Signature:_____

Print Name:_____

MAIL COMPLETED FORM TO: Tree Farm Program, P.O. Box 6004, Rutland, VT 05702-6004