



Belize Covered Structure and Capacity Enhancement Project



Support to Small Disadvantaged Farmers
Funded by the CARICOM Development Fund (CDF)
Implemented by the Ministry of Agriculture, Food Security and Enterprise

APPLICATION/NOMINATION FORM

Form Number: _____

Name of Farmer or Farmer Organization: _____

Address: _____ Contact number: _____
Community District

BAIMS Registration number: _____ Age: _____ Male Female

Land tenure: Property Lease Other

Explain: _____

If the land is not property or lease, what rights will there be to established infrastructure on it. please explain here

Water source: Well Creek/River Pond Water catchment system Other

Crops Cultivated: _____

Please list here the crops typically grown that is suitable for cultivation under Covered Structure

Member of a farmer organization: No Yes

Name of the group (Formal or informal): _____

Do you or the farmer have/had a Covered Structure: No Yes

If so, what is the current status of that Structure: In production Damages Inactive

Have you or the farmer participated in any training on covered structure management or general crop management with the last 3 years: Yes No If yes, List trainings below.

Please use the space below to explain how you or the person you are recommending plan to or can use the project to generate income and how they would market their product (s).

Please use the space below to provide any additional information you believe is relevant to support your application or recommendation.

Please use the reverse side of this paper (if necessary), for any additional information you wish to share or provide.

Name of Nominator: _____ **Contact Number:** _____

Signature: _____

Please drop off completed forms to the nearest Agriculture Department or email to nccard@agriculture.gov.bz

For Official Use Only

Date: _____ **Comments:** _____

Selection criteria met by the applicant
Primary: C₁ C₂ C₃ C₄ C₅ C₆ C₇
Secondary: C₁ C₂ C₃ C₄ C₅

Recommended: Yes No

Signature: _____
Project Coordinator