2019-2020 Seeds for Bees Program Application

Click Here to apply online

Enrollment Deadline: November 1, 2019

APPLICANT INFORMATION

Name (First/Last) __________________________________________ Phone (____) ______ - ______

Mailing Address (Address, City, State, ZIP)
______________________________________________________________

County________________________ Email Address ________________________________

Business Name ________________________________

DELIVERY LOCATION FOR SEED (NO PO BOXES)

Indicate if same as above (___)

Name of person accepting delivery (First/Last) ________________________________

Address (City, State ZIP) _________________________________________________

Phone (____) ______ - ______

Indicate if you would like the shipping service to call before delivery? (___)

SITE AND PROJECT INFORMATION

1. Do you grow bee pollinated crops (including seed production), nuts or fruits. (Growers of wind pollinated crops can still apply.)
   □ Yes □ No

2. If you answered “No” to question #3, please give a brief explanation of how you will use cover crops to improve bee and soil health if accepted.
3. What is the total number of acres you manage? (orchards, vineyards)

_________________________ _______________

4. What is your tree / vine row spacing? (N/A if not planting in orchards or vineyards)

_____________________________

5. How wide is your cover crop strip between the tree / vine rows? (N/A if not planting in orchards or vineyards)

_____________________________

6. Do you propose to plant:
   ______ around the edges of orchard/vineyard  _______ between rows (inside orchard)
   ______ both

7. What are the CO-OP’s or groups that you belong to? (select all that apply) □ Blue Diamond Growers
   □ Central California Almond Growers Association □ Cortez Growers Association □ Farmland Management Services / Hancock □ Westchester Growers □ Select Harvest □ Other ___________

_____________________________

8. What are the crops you grow? (select all that apply) □ Avocados □ Almonds □ Cherries □ Melons □ Nectarines □ Peaches □ Pecans □ Pistachios □ Prunes □ Table grapes □ Walnuts □ Wine grapes □ Other________________________

9. In what kind of crop will you be planting Seeds for Bees cover crops in? (select all that apply)
   □ Avocados □ Almonds □ Cherries □ Melons □ Nectarines □ Peaches □ Pecans □ Pistachios □ Prunes □ Table grapes □ Walnuts □ Wine grapes □ Other ____________

_____________________________


11. What option best describes your soil conditions? □ Compacted □ Loose □ In-between

12. What ground preparation will be accomplished before planting? (If drill seeding "N/A" is acceptable)

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13. What method of planting will you use to plant the cover crop? □ Drill seeding □ Broadcast seeding

15. Will the Seeds for Bees cover crop be planted on certified organic land? □ Yes □ No

16. What is your goal for planting cover crops? (select all that apply)
   □ Erosion control □ Increase water infiltration / break up compacted soil □ Increase organic matter / water availability □ Suppress weeds □ Suppress nematodes □ Increase nitrogen □ Improve pollination / bee health □ Reduce dust □ Reduce ground cracking □ Assist with mummy nut decomposition □ Support western monarch butterfly / local pollinators □ Create visual appeal

17. Have you planted Seeds for Bees cover crops in the past?
   □ Yes □ No   If Yes, for how many years have you participated in the program?
   ___________________________________________________________

18. Is the beekeeper(s) you rent hives from giving a discount for supplemental bee forage?
   □ Yes □ No

19. Please provide the name(s) of the beekeepers you work with: _________________________
   ___________________________________________________________

20. Will the cover crop be planted in the state of California? □ Yes □ No

21. If accepted into the Seeds for Bees program, would you be willing to take part in field days or research projects? □ Yes □ No

22. □ I agree to make every effort not to mow bee forage before target crop has bloomed unless bee forage is jeopardizing the success of target crop (ex. In the case of frost).

23. □ I agree to a short phone consultation with the Seeds for Bees program manager to finalize my enrollment if accepted.

24. □ I acknowledge completing a short survey at the end of the growing season in which I am enrolled is required.

25. □ I acknowledge that submitting two photos (one before and one after) per year of cover crop to Billy@ProjectApism.org is required.

26. Please Choose one of the following:
   □ I understand that the seed provided by Seeds for Bees is not organic due to limited availability of organically grown seed but that it is usually acceptable to plant conventional seed on organically certified ground if the right documentation is provided. I understand
that Project Apis m. will assist with acquiring the proper documentation upon my request, and that it is my sole responsibility to make sure the selected seed mix will be in accordance with the rules of certification. I understand that Project Apis m. recommends providing the necessary paper work to my certifier before planting.

☐ I do not grow organic crops, or grow on organic certified land.

27. How did you hear about the Seeds for Bees program?

☐ Project Apis m. eNewsletter
☐ Almond Board of California
☐ CAPCA
☐ Western Farm Press
☐ West Coast Nut
☐ Pacific Nut Producer
☐ Blue Diamond
☐ Newspaper Article
☐ Local Conservation Agency (NRCS, Resource Conservation Districts)
☐ Local Beekeeper
☐ National, State or Local Beekeeping Organization (ABF, AHPA, etc.)
☐ Other ____________________________

28. Please tell us more about yourself, why you would like to participate in Seeds For Bees, and how you plan to plant the seeds you receive if accepted.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Submitted by______________________________    Date____________________________

Signature________________________________

Applications will be accepted online or by printing and submitting this application with required application materials to: Project Apis m.
Attn: Seeds for Bees
PO Box 26793
Salt Lake City, UT 84126