

**AFM Accreditation Application**

READ CAREFULLY, COMPLETE FULLY, MUST BE TYPED DATE:

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| NAME: |  |  |  |
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| BUSINESS NAME: |  |
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| MAILING ADDRESS: |  |
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| MAILING ADDRESS: |  |
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| CITY: |  | STATE: |  |  ZIP: |  |
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| WORK PHONE: |  | HOME PHONE: |  |  FAX NUMBER: |  |
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| E-MAIL ADDRESS: |  |
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| DESIGNATION(S) HELD: |  ARA |  AAC |  CAC CCA | OTHER: |  |
|  RPRA |  ALC |  |
| **EMPLOYMENT HISTORY** - (List most recent experience first) |
| Employer | Position | From Mo/Yr | To Mo/Yr |
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| **EDUCATION** | Name of School | Years Attended | Year Graduated | Degree |
| High School |  |  |  |
| \*College Undergraduate |  |  |  |
|  |  |  |  |
| Graduate School |  |  |  |
| Special Training |
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| **AGRICULTURAL ORGANIZATIONS AS MEMBER OR OFFICER** |
| Name |  | Official Position/Title |
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**FEES**

Please attach payment of $350 with this application. An additional payment of $**350** for the exam fee will be due when you have been cleared to take the Accreditation exam. An invoice will be sent for the exam fee along with notification that you have been approved to sit for the exam. The exam fee must be paid prior to taking the exam. Both the application fee and demonstration report are good for three exams within a three-year period from date submitted.

**DEMONSTRATION OF MANAGEMENT REPORT** - Submit one farm management plan demonstrating the ability of the applicant to produce management plans according to the standards of the ASFMRA. The plan will be graded and must garner a score of at least 75 percent. A passing score can qualify, as a component of the AFM accreditation process, for three years from the date the plan was graded and passed. Applicants are required to submit two copies of a management plan prepared according to the current ASFMRA Management Plan Outline. Please request a current outline from the ASFMRA office. Minimum passing grade is 75 percent.

If submitting a management plan along with the application, please complete the following:

Date of report:

For whom made:

**Requirements for AFM Examination**

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| --- | --- | --- |
| **Education** |  | **Dates and Location** |
| Ag Lands Management 1  |  |  |
| Ag Lands Management 2  |  |  |
| Ag Lands Management 3  |  |  |
| Ag Lands Management 4  |  |  |
| ASFMRA Code of Ethics |  |  |

**Experience**

Applicant must have four years of farm/ranch management experience or equivalent (as approved by the ASFMRA). Experience must have been completed within the last ten years. One year experience is a calendar year during which a person spends not less than 1,600 hours as follows: at least 600 hours of the 1,600 must be spent managing rural property for a fee or a salary. The balance must be spent in a field related to farm/ranch management. Any prior or equivalent experience should be submitted for review very early in the accreditation process so the ASFMRA can determine if the experience qualifies.

**College Degree**

A four‐year college degree or equivalent (as approved by the ASFMRA). Any equivalent education should be submitted for review very early in the accreditation process so the ASFMRA can determine if the equivalent education qualifies.

**Other Requirements**

Be a current ASFMRA Associate, Professional, Academic, or Accredited member prior to submitting an application for accreditation.

NOTE: The application is not complete without the insert sheet (6 of 6) — please make additional copies of this sheet to furnish a four-year record of your work experience.

**Plagiarism Policy**

Plagiarism of any form within a demonstration report will not be tolerated and is strictly prohibited by the ASFMRA. Broadly, plagiarism is claiming or implying original authorship of material, or incorporating material from another's written or creative material, in whole or in part, into your own document without adequate acknowledgement and reference. Plagiarism differs from forgery, which deals with the authenticity of the writing or some specific object, as plagiarism focuses on the issue of false attribution. Plagiarism is stealing someone else's ideas and presenting them as your own. While patterning a general format is generally acceptable, copying narrative discussion without properly citing the source clearly constitutes plagiarism.  If it is determined that an Applicant has plagiarized all or part of a demonstration report it will serve as grounds for rejecting the report and possibly the entire application, at the discretion of the Management/Consulting Education and Accreditation Committee of the ASFMRA. Such violation may also be reported to the Ethics Committee for further investigation if warranted.

**READ CAREFULLY AND COMPLETE FULLY**

AGREEMENT - I hereby irrevocably waive any claim or right of action at law or in equity that I may have at any time hereafter against the American Society of Farm Managers and Rural Appraisers, its officers, council, committee members, or its other officials, either as a group or as individuals, for any official act in connection with the business of said Society and particularly as to its or their acts in conferring or failing to confer the title of "Accredited Farm Manager", or in disciplining me as a member and as a holder of said title.

It is agreed that any certificate, emblem, or other evidence of said title issued to me shall at all times remain the property of the American Society of Farm Managers and Rural Appraisers and shall be returned to it upon demand if and when requested for any reason whatsoever. It is agreed that I will make no use, public or otherwise, of said title if it is revoked and terminated by said Society.

Has anyone ever made a claim against you, either by legal proceeding or otherwise, based upon, or which could have been based upon, fraud, professional negligence, malfeasance, or theft? 🞏 Yes 🞏 No If yes, please attach a separate sheet detailing the circumstances.

I understand and agree to the above statements.

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

**Mail original application, fees, and supporting documentation to:**

American Society of Farm Managers and Rural Appraisers

720 S. Colorado Blvd, Suite 360-S

Glendale, CO 80246

Phone: (303) 758-3513

FAX (303) 758-0190

E-Mail: ASFMRA@asfmra.org

http://www.asfmra.org

**REFERENCES**

List five references, at least one who is an AFM, and at least two from clients and/or their employees.

Indicate appropriate code for each reference:

1. Employer/Supervisor; 2. Client; 3. Farm Operator; 4. Accredited Farm Manager; 5. Other

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| Name: |  | Reference Code: |  |
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| Business Name: |  |
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| Mailing Address: |  |
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| City: |  | State: |  |  Zip: |  |
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| Phone #: |  | Fax #: |   |
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Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(ATTACHMENT TO THE AFM APPLICATION)**

**PROPERTY MANAGEMENT EXPERIENCE**

*List the total number of agricultural properties and total acres under the appropriate classification:*

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *YEAR*  |  | *CUSTOM/DIRECT* |  | *CROP SHARE* |  | *% LEASE OR CASH RENT* |  | *CONSULTING* |  |
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**AGRICULTURAL EXPERIENCE ALLOCATION**

PERCENTAGE OF YOUR TOTAL WORK TIME ALLOCATED PER YEAR

*Show at least a five-year record*

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Year |  | Ag Property Mgmt |  | Consulting |  | Ag Mgmt. Teaching/Extension |  | Rural Appraising |  | Ag Real Estate Sales |  | Ag Lending |  | Other Specify |  | Total |
|  | % | % | % | % | % | % | % | 100% |
|  | % | % | % | % | % | % | % | 100% |
|  | % | % | % | % | % | % | % | 100% |
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| **OTHER EXPERIENCE OR QUALIFICATIONS (University Extension courses and/or other training)** |
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Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MANAGEMENT OR CONSULTATION ACCOUNTS YEAR: \_\_\_\_\_\_\_\_\_**

This form **MUST** be completed in order to determine experience credit for each year you are requesting credit. Please list **PROPERTIES MANAGED** and **CONSULATION REPORTS WRITTEN.**

**All qualifying work experience must be earned in the ten calendar years immediately prior to the year of application.**

(Use one or more forms for each year)

**[Use check marks (🗸) where applicable]**

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| --- | --- | --- | --- | --- | --- | --- |
| CLIENT | PROPERTY ADDRESS/LEGAL DESCRIPTION | NO. OF ACRES | COUNTY | STATE | TYPE OF PROPERTY | TYPE MGMT. SVC. PROVIDED DIR / CUSTOM / CROP SHARE / % LEASE/CASH RENT/CONSUL. |
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Applicant to submit two separate year-end reports, from properties listed to review minimum standards. Each year-end report shall represent a separate year and property. The Accrediting Committee will select one additional report at random to be submitted.

Date: Signature:

 Type/Print Name: