

2016 Harvest the Fun of Farm to School



Please fill out the form below and return by **October 5, 2016**. Incomplete applications will NOT be accepted: Please email it or fax it to IDALS at: 515-281-6178 or mail it to:

Attn: Tammy Stotts
Iowa Dept. of Agriculture and Land Stewardship
Wallace State Office Building
502 East 9th Street
Des Moines, IA 50319

Contact Info: 515-281-7657 or tammy.stotts@iowaagriculture.gov

By participating in this initiative of the Farm to School Program, you are agreeing to procure fruits or vegetables for your students from a local Iowa farm/grower/orchard. Please submit any pictures or materials that are used as part of this initiative for possible use in Farm to School publications or promotions.

Name: _____ Grade you teach: _____ Phone # _____

Email _____ School Name: _____ County: _____

School Address (supplies sent to) _____

Business Office Address (check will be sent to) _____

School District: _____ School's Federal ID# (W-9): _____

Select your level of participation. A copy of a receipt of produce purchase and a Performance Report will be required by all approved applicants by **November 15, 2016**. Middle and High School Classes will receive alternate items for levels 2 & 3 for the classroom. Participate in ALL 3 LEVELS of fun and your school could be selected for a visit from Iowa Secretary of Agriculture Bill Northey!"

LEVEL 1: Purchase locally grown fruits/vegetables and incorporate into classroom lesson # of students _____

Select Book: Fresh from the Farmstand Cookbook or The Apple Cookbook

Briefly describe the type of lesson you will offer and how you will incorporate the produce _____

LEVEL 2: Enroll in the Midwest Great Apple Crunch **and** submit photos and/or stories of your classroom celebration.

Receive "From the Farm to You!" calendar and fruit/veggie pen/pencil for each student* # of students _____

LEVEL 3: Invite a grower to your classroom to help you celebrate and/or submit a video of your classroom celebration.

Receive the "ABC's of Iowa Farm to School" for each student* # of students _____

Have you participated in an IDALS's Farm to School Initiative previously? Yes No

How many students will be impacted by this? _____

You will be contacted if your classroom is selected to participate in this Initiative through the Iowa Farm to School Program. We appreciate your time and interest in this Initiative.

Signature & title of school representative (authorized to request funds)

Date