



Application for Certification Certified Forage and Grassland Apprentice (CFGGA)

Certification as a Forage and Grassland Apprentice (CFGGA) signifies that the designated individual has successfully completed this application and an exam that documents his or her knowledge in planning critical conservation practices and implementing sound resource management of pasture, hayland, and grazed cropland. Candidates who wish to take the exam and be certified by the American Forage and Grassland Council (AFGC) must complete the Application for Certification and return it, with payment, to AFGC at the address indicated on this form.

Those who earn CFGGA status are required to become certified within three years by meeting experience and continuing education requirements specified by AFGC. More information on CFGP certification is available online at www.afgc.org, or by calling the office at 800.944.2342.

PLEASE TYPE OR PRINT LEGIBLY

Date of Application: _____
Name (Mr./Ms./Mrs.): _____
Company Affiliation: _____
Title: _____
Address: _____
City _____ State _____ Zip/Postal Code _____
Country (other than U.S.A.): _____
Phone: _____ Fax: _____
E-mail: _____

EDUCATION

College/University	Major	Degree	Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Education should include completion of bachelor's degree in Agronomy, Soils, Animal Science, Natural Resources, Range Science, or a closely related field.

Student must be enrolled in a certified educational program working towards an MS or PhD degree in a field closely related to forage or grassland management may be substituted for two years of experience as determined by the Certification Committee. The Committee may, at their discretion, accept other combinations of education and experience as meeting these requirements.

PROFESSIONAL WORK EXPERIENCE

At least five years of full-time experience is required to earn your CFGP certification. Only work that is directly related to grassland/forage resource management will be counted toward the experience requirement. Qualifying experience may consist of employment in farm/ranch management, land management agencies, consulting, teaching, research, extension or technical assistance, or other types of grassland/forage resource management. You may begin documenting experience below.

In the space below, please describe your professional work, starting with your current position. Provide enough detail to characterize the main activities and responsibilities (including number and type of personnel supervised) related to grassland/forage resource management. Keep the descriptions as brief as possible. Do not provide detail on work that clearly does not qualify as grassland/forage resource management experience. You may add pages where space provided is inadequate.

Current Employment

Position/Job Title: _____

Dates of Employment: From _____ To _____

Employer and Location: _____

Immediate Supervisor: _____ Telephone: _____

Percent of Time Directly Related to Grassland/Forage Management: _____

Description of Work: _____

Previous Employment

Position/Job Title: _____

Dates of Employment: From _____ To _____

Employer and Location: _____

Immediate Supervisor: _____ Telephone: _____

Percent of Time Directly Related to Grassland/Forage Management: _____

Description of Work: _____

Previous Employment

Position/Job Title: _____

Dates of Employment: From _____ To _____

Employer and Location: _____

Immediate Supervisor: _____ Telephone: _____

Percent of Time Directly Related to Grassland/Forage Management: _____

Description of Work: _____

EDUCATIONAL EXPERIENCE

Document courses taken towards graduate degree today by attaching current transcript. Any additional training courses outside of college may be documented below and submitted with a certificate of attendance or verification letter regarding participation:

Course: _____ Date Completed: _____

Course: _____ Date Completed: _____

Course: _____ Date Completed: _____

Course: _____ Date Completed: _____

Course: _____ Date Completed: _____

Course: _____ Date Completed: _____

FEES/PAYMENT INFORMATION

Please return this completed form with payment to: **AFGC, PO Box 867, Berea, KY 40403**. If you have questions, please call 800.944.AFGC, fax 859.623.8694, or e-mail info@afgc.org. Fees are used to support CFGPA program administration. Once your application and payment are processed, it will be reviewed by the Certification Committee. AFGC will contact you regarding the result. If your application is approved, you will receive an email with instructions on how to take the CFGA test online. Refunds are not available regardless of certification status. Membership in AFGC is required for certification.

- \$50 AFGC
- \$5 Student Membership

Check Credit Card (circle): AMEX MC VISA Amount: \$ _____

Card Number: _____

Exp. Date: _____ Security Code: _____

Signature: _____

For office use only
Accepted on: _____ By: _____
Payment Received ___ Yes ___ No
Payment Type ___ Check ___ Credit Card