



2024 Leadership Farm Bureau

Deadline: January 15, 2024

Personal Recommendation Form *(Please type or attach a typed letter)*

Applicant's Name: _____

The Leadership Farm Bureau (LFB) program is designed for those who demonstrate leadership potential in agriculture. Please direct your evaluation to the applicant's capability, leadership potential and commitment to agriculture.

Please be candid and objective. This evaluation is critical to the selection committee and represents the county Farm Bureau's position and attitude toward the applicant's leadership potential. No one other than the LFB selection committee will see this recommendation. It is extremely confidential and will remain with the application on file.

Return this completed form to:

Ryan Amaral (ramaral@cfbf.com)

How familiar are you with the applicant? Very Somewhat Not at all

(If you checked "somewhat" or "not at all," please consult with other county leaders who know the applicant well and/or interviewed him/her before completing this form.)

Describe the nature of your contact with the applicant:



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In evaluating the following categories, "superior" should be used sparingly and only when truly warranted. "Excellent" is a strong rating; "good," "fair" and "poor" are self-explanatory.

	<u>Superior</u>	<u>Excellent</u>	<u>Good</u>	<u>Fair</u>	<u>Poor</u>
Esteem in which the applicant is held in the community and/or Farm Bureau	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall assessment of applicant's leadership potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Based on your contact with the applicant, please state why you believe both the applicant and agriculture would benefit from his/her participation in a leadership development program:

Name of Recommender: _____

Relationship to applicant: _____

Address: _____

City: _____

State: _____

Zip: _____

County: _____

Phone Number: _____

Signature: _____

Date: _____