## IOWA MASTER FARM HOMEMAKER NOMINATION

Each year awards are given to a select group of Iowa's farm homemakers who have distinguished themselves through their achievements to deserve of the Iowa Master Farm Homemaker (IMFH) award.

Supporting letters from the nominee's pastor, neighbors, coworkers, community and church leaders, county Extension staff members or other agricultural or civic leaders will strengthen the nomination. We also ask that you try to submit a photograph of the nominee or the nominee and her family. The photo and letters of support are sent to the judges for viewing.

Nominee should **<u>NOT</u>** be aware of the nomination.

Please send the completed nomination form and supporting documents to:

## Nominations are due by April 1st

Joann Allumbaugh - President 25698 Amarillo Ave Linden, IA 50146-8029 Cell: 641.431.0257 JoAnn's email: joann.alumbaugh@gmail.com

## IOWA MASTER FARM HOMEMAKER NOMINATION FORM

NOMINEE'S NAME		
ADDRESS		
		ZIP CODE
AGE:	TELEPHONE	COUNTY
EDUCATION		
HIGH SCHOOL		# YEARS
COLLEGE		# YEARS
OTHER		# YEARS
FAMILY		
HUSBAND'S NAME		
DESCRIBE HIS INVOLV	EMENT IN COMMUNITY	AFFAIRS

DESCRIBE HIS INTERESTS

## CHILDREN: LIST NAME, AGE, EDUCATION, OCCUPATION AND ADDRESS OF EACH. LIST MARRIED DAUGHTERS BY BOTH NAMES AND INDICATE HUSBAND'S NAME.

#### FARM OPERATION

ACRES OWNED \_\_\_\_\_ ACRES RENTED \_\_\_\_\_

ACRES OPERATED \_\_\_\_\_

TYPE OF FARM (GRAIN, LIVESTOCK, DAIRY, GENERAL)

WHAT PERCENT OF THE FAMILY'S INCOME COMES FROM THE FARM?

HOW IS THE NOMINEE INVOLVED IN THE FARM BUSINESS? IN WHAT WAYS DOES SHE SUPPORT THE BUSINESS? (RECORDKEEPING, MARKETING, PRODUCTION ACTIVITIES, ETC.)

#### **EMPLOYMENT**

DOES THE NOMINEE HAVE OFF-FARM EMPLOYMENT?

FULL TIME \_\_\_\_\_ PART TIME \_\_\_\_\_

WHAT TYPE OF JOB IS IT?

#### GENERAL

DESCRIBE THE FAMILY'S HOME ENVIRONMENT (EVIDENCE OF CULTURAL OPPORTUNITY, READING, MUSIC, ETC.)

WHAT EVIDENCE IS THERE THAT THE FAMILY VALUES EDUCATION?

HOW WOULD YOU DESCRIBE THE RELATIONSHIP BETWEEN PARENTS AND CHILDREN?

#### IN WHAT WAYS DOES THE FAMILY WORK AND PLAY TOGETHER?

IDENTIFY SOME OF THE FAMILY'S SPECIAL INTERESTS?

#### ACTIVITIES

# DESCRIBE THE NOMINEE'S INVOLVEMENT IN COMMITTEE, ORGANIZATIONS, ETC. IDENTIFY OFFICES AND LEADERSHIP POSITIONS AND/OR DUTIES PERFORMED.

AG RELATED:

SCHOOL:

EXTENSION:

PROFESSIONAL ORGANIZATIONS:

OTHER ORGANIZATIONS/ACTIVITIES:

HOW DO THE NOMINEE'S HUSBAND AND CHILDREN COOPERATE TO MAKE IT POSSIBLE FOR HER TO ASSUME RESPONSIBILITIES IN ORGANIZATIONS?

WHAT EVIDENCE IS THERE OF THE NOMINEE'S GLOBAL AWARENESS/INVOLVEMENT (INTERNATIONAL EXCHANGES, FOREIGN TRAVEL, HOSTING INTERNATIONAL STUDENTS, UNDERSTANDING OF GLOBAL AGRICULTURAL POLICY, ETC.)

#### **NOMINATING INFORMATION**

DATE

CONTACT PERSON:

ADDRESS:

PHONE: