

**TENNESSEE DEPARTMENT OF AGRICULTURE  
AGRICULTURAL RESOURCES CONSERVATION FUND**

**APPLICATION FOR TECHNICAL ASSISTANCE**

Please indicate below if your organization is requesting Technical Assistance.  
Final allocation for Technical Assistance will be determined later.

Contribution Agreement (County, NRCS and TDA)		Ten Percent (10%) Set Aside	
New Agreement	<input type="checkbox"/>	New Request	<input type="checkbox"/>
Renewal of Existing Agreement	<input type="checkbox"/>	Renewal of Existing Agreement	<input type="checkbox"/>
TDA Amount Requested \$9,000 max			
NRCS Amount Requested \$12,000 max			
Employee Name: (if known)		Employee Name: (if known)	
Employee Years of Service		Employee Years of Service	
Employee Contact Information:	Phone: _____ Email: _____	Employee Contact Information:	Phone: _____ Email: _____
Certifications Earned: (please check)	<input type="checkbox"/> Conservation Planning <input type="checkbox"/> Engineering Job Approval <input type="checkbox"/> Other, _____	Certifications Earned: (please check)	<input type="checkbox"/> Conservation Planning <input type="checkbox"/> Engineering Job Approval <input type="checkbox"/> Other, _____
Primary Employer	<input type="checkbox"/> County Government <input type="checkbox"/> SWCD <input type="checkbox"/> Other, _____	Primary Employer	<input type="checkbox"/> County Government <input type="checkbox"/> SWCD <input type="checkbox"/> Other, _____
		<input type="checkbox"/> Letter from Primary Employer re: Conflict of Interest Attached	

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

\_\_\_\_\_  
Date