

# Morton County Soil Conservation District

## 319 Soil Health Mentor Program

### APPLICATION

**Applications are due by January 24, 2014**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: H: \_\_\_\_\_ C: \_\_\_\_\_

Email Address: \_\_\_\_\_

Field(s) for enrollment (Maximum of 3 fields up to 50 acres total):  
(Please attach farm maps for each field)

Field #: \_\_\_\_\_ Field #: \_\_\_\_\_ Field #: \_\_\_\_\_

Acres: \_\_\_\_\_ Acres: \_\_\_\_\_ Acres: \_\_\_\_\_

Legal Description: \_\_\_\_\_ Legal Description: \_\_\_\_\_ Legal Description: \_\_\_\_\_

How would you rate your current understanding of soil health parameters? 1 = basic 2 3 4 5 = advanced

What do you hope to achieve by participating in this program? \_\_\_\_\_

Are you willing to dedicate the time needed to accomplish the tasks outlined in the program overview? \_\_\_\_\_

What crop rotation are you using at this time? \_\_\_\_\_

Are you currently using minimum soil disturbance farming techniques? \_\_\_\_\_

If so, how long have you been practicing these techniques? \_\_\_\_\_

Type of seeding equipment (Please include brand & model of drill): \_\_\_\_\_

What type of fertilizer and formulation do you use on each crop? \_\_\_\_\_

What type of herbicides and insecticides have you used? \_\_\_\_\_

Do you have any soil erosion concerns? If so, please describe: \_\_\_\_\_

Are there places in the field you were not able to seed in 2013 due to adverse soil conditions? \_\_\_\_\_

Do you have earthworms on the fields you are attempting to enroll? \_\_\_\_\_

Would cattle be integrated into your cropping system(s)? \_\_\_\_\_

What is the intended use of your cover crops: Livestock forage, hay, reducing N inputs, building soil health, other? \_\_\_\_\_