



MEMBERSHIP APPLICATION

NEBRASKA INDEPENDENT CROP CONSULTANT ASSOCIATION

<http://www.nebraskacropconsultants.org> Office: 308 627-7507

Applicant's Name _____ Date _____

Applying for (mark one only)

___ **Independent Member** (4 year degree, 2 years consulting experience and independent) 3 client references are required

___ **Associate Member** (4 year degree, presently consulting and independent) 5 client references are required

___ **Commercial Consultant** (4 year degree, 2 years consulting experience and derives income from the sale of an agricultural input product) 3 client references are required

___ **Allied** (organization sells a product or service) No client references are required

___ **University Liaison** (Designated members of the Cooperative Extension Service) No client references are required

My employer is _____ My title or position is _____

Business mailing address (please print)

Name _____
Address _____
City _____ State ____ Zip _____ - _____

Business Phone _____
Cellular Phone _____
Fax Phone _____
Email address _____

List your educational qualifications

<u>College or University</u>	<u>Year(s) Graduated</u>	<u>Degree(s)</u>	<u>Major</u>
_____	_____	_____	_____
_____	_____	_____	_____

Consulting experience

(types and years)

Client References Phone #

1. _____
2. _____
3. _____
4. _____
5. _____

Services offered: (for consultants only)

- | | |
|---------------------------|---------------------------|
| ___ Soil fertility | ___ Pest management |
| ___ Crop planning | ___ Variety selection |
| ___ Irrigation scheduling | ___ Contract research |
| ___ Water sampling | ___ Soil sampling |
| ___ Record keeping | ___ Equipment calibration |

Please complete and return to:
NICCA
PO BOX 412
KEARNEY NE 68848-0412

FOR USE BY MEMBERSHIP COMMITTEE	
Date dues (\$75 Independent, Associate and Commercial Consultant) received	_____
Date Dues (\$50 Allied) received	_____
Date(s) Application Examined	_____
Date of Approval	_____
SIGNED _____	_____
(Chairman of Membership Committee)	

