**Instructions For AD-2035**

***USDA MINORITY FARM REGISTER***

**Interested persons use this form to sign up for the Minority Farm Register in order to receive outreach information regarding FSA programs.**

**If mailing, please print and mail the original of the completed form to: Minority Farm Register, USDA Stop Code 0503, 1400 Independence Avenue, SW, Washington, D.C. 20250-0503.**

**Customers who have established electronic access credentials with USDA may electronically transmit this form to the USDA servicing office, provided that the customer submitting the form is the only person required to sign the transaction.**

**Features for transmitting the form electronically are available to those customers with access credentials only. If you would like to establish online access credentials with USDA, follow the instructions provided at the USDA eForms web site.**

***Registrants must complete Items 5A & B and 6A & B. All others are optional.***

***Items 1-7***

| **Field Name/**  **Item No.** | **Instruction** |
| --- | --- |
| 1  Ethnicity | Check appropriate box indicating whether you are, or are not Hispanic or Latino. |
| 2  Race | Check appropriate box indicating the race which describes you best. (You can give more than one response.)   * American Indian or Alaska Native * Asian * Black or African American * White * Native Hawaiian or Other Pacific Islander * Other race (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Note: Hispanic or Latino is not a race.) |
| 3  Gender | Check appropriate box indicating your gender (Male or Female). |
| 4  Registrants Preferred Title | Check appropriate box indicating your preferred title (Mr., Mrs., Ms.). |
| 5A  Registrant’s Name | Enter your name (Last, First, Middle Initial). |
| 5B  Registrant’s Address | Enter your address, including ZIP code. |
| 5C  Registrant’s Telephone Number | Enter your telephone number, including area code. |
| 5D  Registrant’s E-mail Address | Enter your name e-mail address. |
| 6A  Signature of Individual | Enter your signature.  If you are mailing or faxing this form, print the form and manually enter your signature. If this form is approved for electronic transmission and you have established credentials with USDA to submit forms electronically, use the buttons provided on the form for transmitting the form to the USDA servicing office. |
| 6B  Date | Enter the date the individual signs the register. |
| 7A  State | Enter the State the farm or ranch is located. |
| 7B  County | Enter the county the farm or ranch is located. |