Attachment D: Producer Registration Form

OMB# 0584-0524 Exp: 12/31/2022

RETAIN FOR YOUR RECORDS

Producer Sign-In Form

OMB BURDEN STATEMENT: This information is being collected to assist the Food and Nutrition Service in assessing knowledge change regarding specific farm to school strategies and topics; your perceptions about usefulness of training topics; your suggestions for improving trainings; and your plans for implementing strategies. This is a voluntary collection and FNS will use the information to evaluate the effectiveness of the farm to school producer training. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0524. The time required to complete this information collection is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, Alexandria, VA 22306 ATTN: PRA (0584-0524).

PRIVACY ACT STATEMENT: This information is being collected for statistical research or reporting purposes only. Please refer to System of Records Notice for FNS-8, "FNS Studies and Reports," located in Federal Register Volume 56 Number 80, for System location, categories of individuals covered, categories of records, purpose, routine uses, storage, retrieval, safeguards, and retention and disposal. FNS-8 is located here: https://www.govinfo.gov/content/pkg/PAI-2017-USDA.xml#fns8. Records will not be retrieved by personally-identifiable information and retention requirements will be followed in accordance with FNS Agency Records Retention Schedule and Records Management Policy 270-1.

This form will be filled out by producers when they take part in the training, and will be filled out online. (Paper registration forms will be available if the trainer does not have a computer at the training).

Your name:
Name of farm:
Email address:
Date of training:
In which state(s) is your farm located?
State:

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