

**AGREEMENT TO CONDUCT PRODUCTION AND/OR FINANCIAL  
MANAGEMENT TRAINING FOR FARM SERVICE AGENCY BORROWERS**

**INSTRUCTIONS FOR PREPARATION**

<b>Purpose:</b> The form is an agreement between the vendor and FSA for the vendor to become an approved provider for borrower training. The agreement enables the vendor to provide training in production and/or financial management to FSA borrowers.	
<b>Handbook Reference:</b> 3-FLP	<b>Number of Copies:</b> Original and 1 copy
<b>Signatures Required:</b> FSA State Executive Director and Vendor’s Representative.	
<b>Distribution of Copies:</b> Original in State Office Operational file. Copy to the Vendor.	
<b>ADPS/DLS/FBP/GLS Related Transactions (complete this field only when needed and provide only the information required, i.e. ADPS Transaction 3K):</b> N/A	

*Part A, Items 1- 4 completed by FSA.*

<b>Fld Name / Item No.</b>	<b>Instruction</b>
1 Agreement	Read agreement between FSA and vendor.
2A-2F Goals for Training	Read the statements and enter a check in the applicable checkbox to indicate what the borrower is expected to learn.
3A-3L Vendor’s Responsibilities	Read statements and enter the dollar amount to be collected from each borrower for training fees in Item B.
4 Agreement	Read agreement between FSA and vendor.

***Part B, Items 1A through 1D completed by FSA.***

<b>Fld Name / Item No.</b>	<b>Instruction</b>
1A Name	Print name of the State Executive Director.
1B Signature	Enter signature of the State Executive Director.
1C Date	Enter date agreement signed.
1D Office Name and Address	Enter State Office name and address.

***Part C, Items 1A through 1D completed by Vendor or Representative.***

<b>Fld Name / Item No.</b>	<b>Instruction</b>
1A Vendor's Name	Print name of Vendor or Representative.
1B Signature	Enter signature of Vendor or Representative.
1C Date	Enter date agreement signed.
1D Vendor's Address	Enter address of vendor.