



Republic of the Philippines
 Department of Agriculture
AGRICULTURAL TRAINING INSTITUTE

ATI Building, Elliptical Road, Diliman, Quezon City, Metro Manila 1100
 Tel. Nos. (63-2) 8929-8541 to 49 & 8928-7397 Fax No. (63-2) 8920-9792
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 URL: http://www.ati.da.gov.ph; www.e-extension.gov.ph

Center-CALABARZON

FARMING LEARNING SITE FOR AGRICULTURE (LSA) PROFILE FORM
 (Individual/Private Organization/Government Institution)

Name of Farm: _____

The Owner: ____ Farmer/Farm Family ____ Private Organization ____ Government Institution

A. THE OWNER'S PROFILE

A.1 For Individual Farmer/Farm Family

Name of Applicant:				
Sex: ____ Male ____ Female	Date of Birth:		Ethnic Origin/Tribe:	
Civil Status:	____ Single	____ Married	____ Separated	____ Widow
Home Address:				
Cellphone No.:		e-mail Address:		
Educational Attainment:				
RSBSA/NCFRS Registration No.:				

A.2 For Private Organization/Government Institution

Name of Organization:		
Registered Address:		
Name of Farm Manager/In-Charge:		Position/Designation:
Educational Attainment of Farm Manager/In-Charge:		
Cellphone No:	Landline:	e-mail Address:

1. Membership in Organization of the Individual Farmer/Farm Family/Affiliations of the Organization/Government Institution

Name of Organization	Date Joined	Position, if any



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2. Trainings/Seminars/Workshops/Conferences attended by the Farmer/Farm Family/Organization/Institution Farm In-Charge, Local & Foreign *(Use additional Sheets if necessary)*

Title of Training	Date Attended	Name of Sponsoring Organization

3. Topics Delivered/Capable of Delivering as Resource Person by the Farmer/Farm Family/Organization Farm In-Charge

Topic	No. of times delivered	Audience

B. THE FARM (For Individual/Organization/Institution)

Location/Address of Farm:	
Total Farm Area:	For Natural/Organic Farming Practice
Year started Farming: _____	Area devoted to Organic Farming: _____ Year started Organic Farming: _____ No. of Years in Organic Farming: _____
No. of Years in Farming: _____	
Business Permit: _____	
No. of Workers: Male _____ Female _____ Total _____	

C. FARM ENTERPRISE

Component (commodities/projects)	Area Devoted	Ave. Annual Production	Average Income

D. FARM OPERATION

List of Farm Facilities

- ___ Training/Activity Hall
- ___ Toilet
- ___ Wash Area (For farm tools and equipment)
- ___ Storage Room

Other Facilities

- ___ Administrative Office
- ___ Dormitory/Guest House
- ___ Material Recovery Facility
- ___ Parking Area



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Demonstration Area

- Plant nursery
- Fertilizer and Feeds production area
- Vegetables, Herbs and Spices production area
- Livestock production area
- Poultry production area
- Fishery production area
- Cut Flowers, Ornamentals, and Succulents production area
- Post-harvest area

Farm machinery/tools, specify below:	Quantity

Prepared by:

(Farm-Owner/Farm Manager/Farm-in-charge)

Privacy Statement

The Agricultural Training Institute is committed to protect and respect your personal data. We recognize our responsibilities and our data subject's right under the Republic Act No. 10173, also known the Data Privacy Act of 2012.

Privacy Consent

I have read and understand the Institute's Data Privacy Statement and express my consent for ATI to collect, store, use, share, process and update my personal information.

Signature over printed name of Applicant