

# NATIONAL ALLIANCE OF INDEPENDENT CROP CONSULTANTS

## LEADERSHIP PROGRAM

*NAICC Leadership Program's purpose is to help ensure agricultural sustainability  
by facilitating the growth of new leaders within NAICC*

## INFORMATION AND APPLICATION



### PROGRAM OBJECTIVES:

1. Enhance leadership skills and personal development to promote NAICC; the crop consulting, research consulting, and quality assurance professions; and agriculture
2. Encourage networking and rapport among ag professionals
3. Prepare leaders to be an effective resource for policy-makers and enforcement agencies in relation to agriculture

*Sponsored in part by:  
Foundation for Environmental Agriculture Education  
FMC Corporation  
AMVAC Chemical Company*



## OVERVIEW AND APPLICATION PROCESS

### Overview of Program

The NAICC Leadership Program (NAICCLP) consists of three modules starting in the summer or fall months and continuing to a March meeting in Washington, DC the following year.

#### Module I Two Summer or Fall Field Visits

Class participants will individually make a one-day visit to another NAICC member's facility who shares the applicant's area of expertise. The second visit will be made to an NAICC member's facility that is outside of the applicant's area of expertise. The second visit is estimated to be three days. Travel time may extend the days estimated above.

*Participant's responsibilities include:*

- *Allocating time away from work to attend these trips*
- *Discussing with host on business aspects of facility and local, state and national issues affecting host and his/her clients.*
- *Submitting a newsletter article about experience with hosts*
- *Sending thank you notes to hosts*

#### Module II NAICC Annual Meeting

The NAICC Annual Meeting is an excellent way to hone leadership skills and work closely with the current NAICC leadership. Time at the Annual Meeting is estimated at a minimum of 5 days.

*Participant's responsibilities include:*

- *Allocating time away from work to attend this meeting*
- *Participating in NAICC committee meetings*
- *Participating in a public speaking workshop*
- *Making a presentation about the Leadership Program during Plenary/Business Session*
- *Participating in New Members events*
- *Interacting with exhibitors in the Exhibit Hall and at the Sustaining Members reception*



- *Moderating a session at the Annual Meeting if necessary*
- *Collaborating with other participants on a newsletter article about experience*
- *Assisting members of The Foundation with their silent auction and raffle*
- *Transportation to and registration for the NAICC Annual Meeting (2 nights lodging will be covered as will spouse registration for this Annual Meeting)*

### **Module III      Washington, DC**

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This module focuses on promoting NAICC and our profession to policy-makers. Estimated time for the Washington trip is approximately 4 days.

*Participant's responsibilities include:*

- *Allocating time away from work to attend this meeting*
- *Participating in a workshop on leadership fundamentals and ethics*
- *Visiting with NAICC Governmental Affairs Committee member(s) and reviewing the Ray Young Washington Leadership video*
- *Attending Crawfish Boil on the Hill*
- *Accompanying Executive Board on Hill visits to policy makers*
- *Collaborating with other participants on a newsletter article about Module III*
- *Providing input to the NAICC Executive Board regarding issues discussed on visits in Module I*

### **Application and Selection Process**

#### **Eligibility**

Applicants must be a member in good standing of NAICC. Four applicants will be selected for each leadership class.

#### **Application**

Completed application consists of Application document (6 pages); signed Acknowledge Page, signed Commitment Pages.



## **Selection Process**

All applications will be reviewed by the NAICC Leadership Program Committee. Four candidates will be chosen and submitted to the NAICC Executive Board for final approval.

The NAICC Leadership Program is for individuals who:

1. Are dedicated to NAICC, the crop and research consulting professions and the success of the NAICCLP
2. Have a willingness to participate in all activities to learn, grow and promote NAICC
3. Have integrity, character and the ability to get along with others

## **Participant Expenses**

Participants are asked to pay a \$500 participation fee to help offset expenses such as printed materials, travel, lodging, and speaker fees.

Payments can be made by check or credit card and are due upon notice of acceptance to the program. Scholarships are available. Check the appropriate box on the application or contact Allison Jones, NAICC Executive Vice President for more details.

Participants are responsible for travel, lodging and registration fees for the NAICC Annual Meeting (Note: two nights lodging will be moved to the NAICC Master Account prior to checkout.)

Other out-of-pocket expenses will be the responsibility of the participant including hotel/travel incidentals (examples: telephone, movies, snacks, bar, non-program meals, Internet use, laundry, etc.), transportation and/or medical insurance needs.

NAICC will be financially responsible for expenses related to travel to and from all events except the NAICC Annual Meeting; all meals designated by NAICC while at destinations (with exception of the Annual Meeting), all promotional and session materials.

## **Deadlines**

Applications due:	June 15
Facility Visits:	Summer or Fall
Annual Meeting:	January
Washington, DC:	March



## Participant Expectations

It is an honor to be a part of this program and participants are expected to be responsible leaders who project a positive image of themselves, NAICC, their communities, and agriculture. All participants are expected to:

- Attend all seminars tours, and program activities
- Be punctual for all seminars and activities
- Be committed for learning and personal growth
- Be courteous and respectful to class members, speakers, hosts, tour guides, staff, donors, guests, alumni, and program directors
- Interact with class members and participate in program activities such as assignments, presentations, and discussion sessions
- Be willing to listen respectfully to speakers or class members with differing ideas, beliefs, and value systems
- Complete seminar/program evaluations
- Send thank-you notes to speakers and tour guides
- Grant permission for use of one's name, photo, and a description of business
- Actively participate in alumni activities following graduation

## Code of Conduct

**Attendance Policy** –Attendance is mandatory for all modules/sessions. Participants agree to arrive on time and stay until the end. Participants are expected to stay overnight at the designated hotel locations unless otherwise approved by NAICC staff. While circumstances may arise that prevent your attendance, there are no excused absences. As developing leaders, you are the ones who will have to prioritize and balance your commitments to your families, your businesses, and your peers. Participants are expected to notify the staff prior to the sessions of any anticipated absences. Participants may be held liable for any hotel/food expenses associated with their absence. Participants who miss more than one seminar may forfeit travel seminar opportunities and may be dismissed from the program without a participant fee refund.



**Alcohol Policy** - As leaders and program participants you are representing your state, your industry, and NAICC. Consequently, excessive consumption of alcohol during any scheduled NAICCLP event is unacceptable and grounds for dismissal from the program without participant fee refund.

**Tobacco Products Policy** – Tobacco use during any indoor seminar session is prohibited. Participants are expected to abide by any and all local regulations.

**Electronic Devices** - All electronic communication devices are to be stowed out of sight and out of hearing during formal seminar sessions and study tour presentations. Laptops/tablets may be used only for program activities during seminar sessions. Participants are free to use their electronics during breaks.

**Dress Code** - Dress and appearance are part of professionalism; thus NAICCLP participants are expected to abide by the following dress codes. Generally, business casual is required for most sessions. Business attire will be required for the Washington, DC trip. For field visits, dress appropriately as situation dictates.

Business Attire: Men-coat, tie, dress shirt/pants and dress shoes  
Women-dress or business suit/slacks, dress shoes

Business Casual: Men-casual slacks, khakis, collared shirts, and casual shoes  
Women-casual slacks, skirts, blouses, polos, casual shoes



# NATIONAL ALLIANCE OF INDEPENDENT CROP CONSULTANTS LEADERSHIP PROGRAM

## APPLICATION

DATE: \_\_\_\_\_

PROFESSIONAL SPECIALIZATION: (check all that apply)

Crop Consultant    Quality Assurance    Research Consultant

NAME: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

PHONE: (BUSINESS) \_\_\_\_\_ HOME: \_\_\_\_\_

MOBILE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

Member of NAICC Since: \_\_\_\_\_

## PERSONAL INFORMATION

Date of Birth: \_\_\_\_\_ Gender:    Male    Female

Spouse's Name (if applicable): \_\_\_\_\_

## EDUCATION

Please list highest level of education achieved

Name of School: \_\_\_\_\_

Date of Graduation: \_\_\_\_\_ Diploma/Degree \_\_\_\_\_

Major: \_\_\_\_\_ Minor (if applicable) \_\_\_\_\_



## EMPLOYMENT

Are you self-employed? \_\_\_\_\_

If you work for a company, what is your position? \_\_\_\_\_

Name of Immediate Supervisor: \_\_\_\_\_

Please list work experience since high school: \_\_\_\_\_

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Please list all state(s) in which you consult/work: \_\_\_\_\_

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Please list the crops for which you consult: \_\_\_\_\_

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## PROFESSIONALISM

List any NAICC leadership activities in which you are/were involved: \_\_\_\_\_

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List any professional organizations of which you are a member: \_\_\_\_\_

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List any community services/activities in which you are involved: \_\_\_\_\_

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List any honors you have received personally and professionally: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## ESSAY

In 250 words or less, please tell us why you are interested in the NAICCLP and how you would expect to use the knowledge and experience gained. You may also attach your essay to this application.



# Acknowledgments

## ~ Emphasis on Safety ~

We are serious about safety. We expect you to be serious about safety also by following the instructions of various tour guides and hosts, by acting prudently, and by using good judgment. NAICCLP offers a wide array of exciting learning opportunities. However, participation does carry a degree of risk and personal responsibility. It is important to read and understand the following caveats.

Although the National Alliance of Independent Crop Consultants (NAICC) has taken precautions to ensure an enjoyable, educational, and safe experience, it is impossible to guarantee absolute safety. There is inherent risk in travel. Conditions at various tour destinations and actions of other parties, such as drivers, event holders, sponsors, and organizers, are beyond our control. By signing below, you acknowledge that the National Alliance of Independent Crop Consultants (NAICC) affiliates are not responsible for the errors, omissions, acts, or failure to act of any party or entity conducting a specific event, tour, or activity as part of this program.

## ~ Emergency Medical ~

By signing below, you authorize the National Alliance of Independent Crop Consultants (NAICC) or its authorized designee to obtain emergency medical treatment for you, if needed, as may be deemed advisable. You understand that the NAICC does not provide health insurance for you and that you should carry your own health insurance. You will be financially responsible for any costs of such treatment. Further, by signing you certify that you are physically fit and sufficiently prepared to participate and that you are not disobeying instructions from a qualified medical professional who advises against your participation.

## ~ The Legal Stuff: Waiver & Release of Liability ~

In consideration for being allowed to participate in the NAICC Leadership Program, you assume responsibility for your own safety and needs and for all of its potential risks. Participation in this program is strictly voluntary, and by signing you acknowledge that you freely choose to participate.

With the intention of being legally bound by this document, the undersigned hereby releases from liability and agrees to indemnify and hold harmless the National Alliance of Independent Crop Consultants (NAICC) and any of its employees, contractors, volunteers, or agents representing National Alliance of Independent Crop Consultants (NAICC). This release is for any and all liability for personal injuries (including death), disability, property losses or damages, property theft, or actions of any kind which may occur as occasioned by or in connection with traveling, activities, or accommodations relating to this program. The undersigned hereby forever acquits and discharges the National Alliance of Independent Crop Consultants (NAICC) and any of its employees, contractors, volunteers, agents, or affiliates of and from any and all actions, claims, causes of actions, loss of services, loss of earnings, costs, demands or damages, on account of or in any way arising out of any and all known and unknown causes which may occur with the aforementioned. By signing, you understand that this document is written to be construed broadly to the maximum extent permissible under applicable law. If any portion is held invalid or unenforceable, then you agree to be bound by the remaining terms.

I CERTIFY THAT I HAVE READ THIS DOCUMENT. I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND IS LEGALLY BINDING UPON ME, MY AGENTS, AND HEIRS. I SIGN IT OF MY OWN FREE WILL.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



## PARTICIPATION COMMITMENT

**Participation Fee Payment** - Please indicate how you will handle the participation fee

I will personally pay the full amount

My employer/sponsor will pay the full amount

My employer/sponsor will pay a partial amount, and I will be responsible for the balance

I would like information on scholarship assistance

If employer/sponsor is paying part of or the entire fee, please complete the section below:

Amount to be paid by employer/sponsor: \_\_\_\_\_

Signature of employer/sponsor: \_\_\_\_\_

Printed name of employer/sponsor: \_\_\_\_\_ Title: \_\_\_\_\_

Employer/Sponsor mailing address: \_\_\_\_\_

\_\_\_\_\_

All participants are required to attend ALL program sessions in their entirety. Refunds will not be given if participant does not fulfill these requirements.

**Employer Commitment - FOR APPLICANTS WHO ARE NOT SELF-EMPLOYED** please have your immediate supervisor complete the following section.

If \_\_\_\_\_ is selected to participate in the National Alliance of Independent Crop Consultants Leadership Program, we agree to provide time away from work for him/her to attend all required activities of this program as well as any expenses not covered by the applicant or NAICC.

I have read the materials provided in the National Alliance of Independent Crop Consultant Leadership Program Information and Application packet and am aware of the time and resource requirements of this program.

Signature of employer/supervisor: \_\_\_\_\_

Printed name of employer/supervisor: \_\_\_\_\_ Title: \_\_\_\_\_



**Spouse Commitment** - Spouses are an important part of this program and need to be knowledgeable about the program and the time commitments. We ask spouses to make a commitment as well by signing below acknowledging your willingness to support your spouse's participation in this program. As a way of showing our appreciation, we will extend complementary spouse registration to the NA-ICC Annual Meeting where your spouse will be honored.

Spouse Signature: \_\_\_\_\_

**PARTICIPANT COMMITMENT** - I, the undersigned applicant, attest to everything stated in my application is true and complete.

I have read all of the information in the National Alliance of Independent Crop Consultant Leadership Program Information and Application packet indicating the requirements for participation in the program and agree to all responsibilities outlined within. I also agree to commit the time and resources necessary to attend all functions.

I also agree to the release NAICC, its staff and Executive Board members of liability as outlined on the Acknowledgement page.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return application to:**

**NAICC  
349 EAST NOLLEY DRIVE  
COLLIERVILLE, TN 38017  
AllisonJones@naicc.org  
P: 901/861-0511 F: 901/861-0512**

