

SOUTH CAROLINA YOUNG FARMER DAIRY PRODUCER OF THE YEAR

PURPOSE:

The Young Farmer Dairy Producer of the Year is designed to encourage Young Farmers to increase the efficiency of their dairy operation through the use of recommended production practices and management.

GENERAL RULES AND REGULATIONS:

1. Contest open to all Young Farmer members in good standing with the South Carolina Young Farmer and Agribusiness Association.
2. Applications must be submitted to the regional coordinator before December 1.
3. A committee selected by the Young Farmer State Executive Committee will review the application to determine the State winners.
4. All awards will be presented at the State Young Farmer's Convention.

AWARDS:

\$300 cash and engraved plaque to the State Winner

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**SOUTH CAROLINA YOUNG FARMER DAIRY PRODUCER OF THE YEAR
200__**

Last Name: _____ First Name: _____ MI: _____

Address: _____ City, State, Zip: _____

Young Farmer Chapter: _____

Farming Status: _____

FARMING OPERATION

No. of acres owned _____ Rented _____ Acres of pasture _____

Hay _____ Silage _____ Other Crops _____

No. of registered animals _____ No. of grade animals _____

No. of cows in milk production _____ Dry cows _____ Heifers _____

Breed of cows _____ Testing program using _____

Rolling herd avg. (Sept. 30) _____ Milkfat Protein _____

Somatic cell count _____ Plate count (PI) _____

Standard Plate Count _____ Breeding program _____ (%)
artificial bull

Type of feed used

Roughage program

Is forage testing used?
How do you use the data?

Do you split herd?
How do you split

Attach a copy of DHIA Report or other records for the month of September

To whom do you ship milk to _____

No. of raised replacement heifers _____ No. purchased replacement _____

Average number of days in milk _____

No. breeding stock sold _____ No. of cull cows sold _____

Type of milking facilities

Write a statement about how you started in dairying and management decisions you make in your dairy operation. Include a brief description of your milking operation, feeding practices, breeding program and marketing plans.

(DATE SUBMITTED)

(APPLICANT'S SIGNATURE)

(LOCAL YFAA OFFICER)

(ADVISOR SIGNATURE)