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 **Annexure C2**

# NOMINATION FORM

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| **BEST SUBSISTENCE PRODUCER** **DALRRD WOMEN ENTREPRENEUR AWARDS 2024/25 -2028** |
| Western Cape Department of AgriculturePrivate Bag X1, Elsenburg, 7607 |
| Tel: Email: (Details of District Manager / District Coordinator) |

## SECTION 1

**Personal Information:**

|  |
| --- |
| Name of the enterprise(e.g. Luthando LTD)  |
| Name of owner: (e.g. Ms Noluthando Maseko)  |
| Job title of nominee:  |
| Physical address :  |
| ID(Attach copy) :  |
| Postal address :  |
| Banking details :  |
| Contact numbers and e-mail for the owner : Contact numbers and e-mail for a nominee:  |

## SECTION 2

**Enterprise Information:**

|  |
| --- |
| 2.1 Type of enterprise: 2.2. Specialized commodity:  |
| 2.3. Background of the enterprise:  |

## SECTION 3

**Farming Practices:**

|  |
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| 3.1 Farming Methods: 3.1.1 Indigenous Knowledge Systems (IKS) 3.1.2 Use of new technology (Innovation) 3.1.3 Responsible use of production inputs (pesticides, fertilizers, vaccines, etc.)  |
| 3.2 Natural Resources Management: 3.2.1 Caring for natural resources, adaptation and mitigation to climate change:  |

## SECTION 4

**Production**

|  |  |  |  |
| --- | --- | --- | --- |
|   | **QUALITY OF PRODUCT AND QUANTITY OF PRODUCE**  |  |  |
| Produce  |  | Quality  | Quantity  | Scale of operation  | Scale of household consumption  |
|   |  |   |   |   |   |
|   |  |   |   |   |   |

## SECTION 5

**Community Involvement**

Contribution to community development

**Name of Nominee:**

Signature: Date:

**Name of the Nominator (Extension Officer name):**

Signature: Date:

**Name of the District Manager:**

Signature: Date: