



Kentucky State University

Beginner Beekeeping Program

2024-25 Application

KENTUCKY STATE UNIVERSITY
LAND GRANT PROGRAM
COOPERATIVE EXTENSION BUILDING
400 E. MAIN STREET FRANKFORT, KY 40601
(502) 597-6831

FUNDING PROVIDED BY
KADF
KENTUCKY AGRICULTURAL
DEVELOPMENT FUND

PROGRAM GUIDELINES

The Kentucky State University Beginner Beekeeping Program is a collaboration among Kentucky State University (KSU), Kentucky State Beekeepers Association (KSBA), the Kentucky Queen Bee Breeders Association (KQBBA) and local beekeeping groups. The objectives of the program are to help provide resources to beginner beekeepers, encourage participation in local beekeeping groups and to assist in improving the genetics of the Kentucky bee population. The overall goal of the program is to ensure that beginning beekeepers start with best practices to create more resiliency in local bee populations, which will lead to better pollinators for agriculture and improved biodiversity.

WHO IS ELIGIBLE?

Individuals who are interested in applying for the KSU Beginner Beekeeping Program must meet the following criteria:

- Satisfy eligibility requirements of the KSU Beginning Beekeeper program
- Currently a member of a local Beekeeper Association and/or KSBA
- Complete 6 Beekeeping Continuing Education Units (CEU) and submit verifying documentation (Courses can be free with a membership to the Kentucky State Beekeepers Association)
- Submit regular progress reports on bee hive health, productivity and other observations
- Commit to improving the genetics of Kentucky bees by agreeing to:
 - Purchase nucs/hives from local beekeepers and/or swarm trapping
 - Purchase queens with varroa mite resistant genetics

WHAT IS INCLUDED IN A BEGINNER BEEKEEPING KIT?

The beginner beekeeping kit covers the:

- Basic hive box materials to receive nucs from beekeepers
- Basic tools for beekeeping like smoker and hive tool
- Basic personal protective equipment (PPE) for beekeeping like helmet and veil
- Test kits for disease and pests such as European Foulbrood or American Foulbrood

BEEES ARE NOT COVERED.

KENTUCKY STATE UNIVERSITY IS AN EQUAL OPPORTUNITY PROVIDER

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at [How to File a Program Discrimination Complaint](#) and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

USDA is an equal opportunity provider, employer, and lender.

BEGINNER BEEKEEPING PROGRAM APPLICATION

Name of Farm, Company, or Organization: _____

Contact Person for Project: Mr./Ms. _____

Mailing Address: _____

Town/City: _____ County: _____ State: _____ Zip Code: _____

Farm Address (if different from above): _____

Town/City: _____ County: _____ State: _____ Zip Code: _____

Phone: _____ Email address: _____

Preferred Communication Method (Choose one or more):

Postal Mail Telephone Email

Social Security Number or Federal Tax ID Number: _____ FSA farm number: _____

How did you learn about this grant program? _____

In which beekeeper group do you have membership? _____

Please provide the following information for your beekeeper group:

County: _____ President: _____ Number of Members: _____

Contact (phone/email): _____ Social Media: _____

Do you have a beekeeper who is willing to serve as your mentor?

Yes No

Please provide the name and contact information of your beekeeping mentor:

Name: _____ Contact (phone/email): _____

At the time of application, how long have you been beekeeping?

Less than 1 year 1-2 years 2-5 years More than 5 years Never

What other groups are you a member of or affiliated with? (Mark [X] all that apply)

Kentucky Proud Farmers Market OAK KAA CFA

Appalachian Proud KDA Organic Program KWIA Grow Appalachia

Others: _____

Beginner Beekeeping Program Application continued

What type of records will you keep to show your success? _____

Who will complete the required reports? _____

Are you willing to share pictures or give tours of the project?

Yes No

Please provide a narrative to explain why you are a good candidate for the KSU Beginner Beekeeping Program. Use 250 words or less.

Beginner Beekeeper Program Application continued

PROGRAM GUIDELINES

Please use an [X] to indicate you agree with the program guidelines.

- I agree to maintain my membership in my current beekeeper group.
- I agree to complete 6 continuing education units (CEU) through KSBA or other accredited organization.
- I agree to acquire bees from local beekeepers, either as nucs or hives and/or trap local wild swarms.
- I agree to acquire queen bees from a member of the Kentucky Queen Bee Breeders Association.
- I agree to keep ongoing records regarding the bee hive health, productivity and other observations.
- I agree to submit regular update reports to the KSU Beginner Beekeeping Program.

I have read and understand the attached guidelines in requesting these funds.

Submitted by: _____
Signature of Applicant

Date: _____

Please mail the completed application and all supporting documents to:

**Kentucky State University
Robinson Center for Appalachian Resource Sustainability
ATTN: Kevin Gurtowski
130 Robinson Rd
Quicksand, KY 41339**

**Please contact Kevin Gurtowski with questions at (606) 568-7406 or
kevin.gurtowski@kysu.edu**

Digital and scanned applications (.PDF format) will also be accepted via email.