

Iowa Holstein Association Master Breeder Award Nomination Form

Name: _____ Phone: _____

Address: _____

District: _____ County: _____ Birth Date: _____

Currently Milking or Retired, Explain if needed: _____

Milking Herd Size: _____

DHI Average:

_____ Milk _____ % _____ Fat _____ % _____ Protein Year _____

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_____ Milk _____ % _____ Fat _____ % _____ Protein Year _____

Classification Average Score _____ BAA% _____ # of Head _____ Year _____

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Classification Average Score _____ BAA% _____ # of Head _____ Year _____

Number of years you received the PBR Award? _____

Number of years you have been active in the registered Holstein business? _____

Please use additional paper if needed to completely answer the following questions.

1. Discuss your former/current breeding program.

2. Discuss your major accomplishments in your dairy operation.

3. Do you do your own mating? _____ If not, explain:

4. Discuss the criteria used in mating selection.

5. Have you sold any registered Holsteins for breeding purposes to AI, foreign countries, embryos, state and national sales, etc.?

6. Holstein Association Activities at the local, district and state levels:

7. Activities in other Dairy Organizations such as AI, DHIA, Coops, Dairy Promotion, etc.

8. Church and Community Activities:

9. Family Information:

10. Other Comments:

Nominated by _____ (local or district officer) Date _____

*Please send your completed application to: Iowa Holstein Association, 3422 140th St, Brooklyn, IA 52211
postmarked no later than November 1.*