Rangeland Health Assessment Program (RHAP)
Application Approval Checklist

Applicant ________________________________  Date __________________

Project Reference Name ____________________________________________

☐ 1. Applicant Information
☐ 2. General Project Information
☐ 3. Project Land Area (including maps)
☐ 4. Partners for the project with signed agreement forms
☐ 5. Project Narrative
   a. Project Name and Summary (one-page maximum)
   b. Project Description
      i. Project. Describes the health assessment project.
      ii. Monitoring Plan Submission Date. Provide a date when the completed monitoring plan will be submitted to the WDA.
      iii. Goal(s). Describe the over arching goal(s) for the project. Identify monitoring plan goal(s) reflecting management objectives, resource objectives and concerns.
      iv. Objectives. Lists the project’s specific measurable and obtainable objectives, as related to the scope of the RHAP.
      v. Explanation of how the project aligns with the overall short-term and long-term goals of the RHAP as provided in the Wyoming Department of Agriculture (WDA) Chapter 15 Regulations Governing the RHAP.
      vi. Statement of how this project fits into the priority areas of the federal/state land management agency (if applicable).
      vii. Expected outcomes and how the information from the project intends to be used in the NEPA process, for adaptive management in the project area, etc.
      viii. Project start and end date.

☐ 6. Priorities - how this project addresses priorities (Director Program Priorities 2011 list)

☐ 7. Budget (If the applicant is requesting funding)
   a. Minimum 30% match
   b. Sufficient Budget Justification Detail to support the Budget figures

Requested __________________
Match ______________________
Awarded ____________________

Reviewer Comments and Initials: ________________________________________

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Received ______________________
Reviewed ______________________
Approved by BOA ______________
Not Approved by BOA __________
Contract Executed ______________
Monitoring plan received __________

8/4/11