







# CONSERVATION STEWARDSHIP PROGRAM

## Documentation and Implementation Requirements

Participant will:

- Prior to implementation, provide NRCS with the planned crop rotation and tillage operation(s) used for each crop.

Field	Acres	Planned Crops (in sequence)	Length of Crop Rotation (years)

Field	Crop	Field Operation	Timing of Field Operation (month/year)

- During implementation, notify NRCS of any planned changes in crops, crop rotation, or field operations to verify the planned system meets the enhancement criteria.
- After implementation, if changes to the rotation were made, complete the tables above to document the applied Conservation Crop Rotation for the contract period and provide to NRCS.

NRCS will:

- As needed, provide technical assistance in selecting crop rotations or substitute crops that would meet the criteria of the enhancement.
- Prior to implementation, verify that the crop rotation includes at least two different crops in a minimum three year crop rotation.
- Prior to implementation, verify the crop rotation includes at least one resource conserving crop (refer to State Specific List of Resource Conserving Crops).
- Prior to implementation, use information provided from the participant to calculate the management Soil Conditioning Index (SCI) value using current NRCS wind and water



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erosion prediction technologies. Crop rotation must produce a positive trend in the Organic Matter (OM) subfactor value. **Management SCI Value = \_\_\_\_\_**  
**OM subfactor value = \_\_\_\_\_**

- During implementation, evaluate planned changes in crops, crop rotation, or field operations to verify the planned system meets the enhancement criteria.
- After implementation, if the applied crop rotation is different than the planned crop rotation, use information provided from the participant to calculate SCI value to document that the applied rotation met the enhancement criteria.  
**Management SCI Value = \_\_\_\_\_ OM subfactor value = \_\_\_\_\_**

### NRCS Documentation Review:

I have reviewed all required participant documentation and have determined the participant has implemented the enhancement and met all criteria and requirements.

Participant Name \_\_\_\_\_ Contract Number \_\_\_\_\_

Total Amount Applied \_\_\_\_\_ Fiscal Year Completed \_\_\_\_\_

\_\_\_\_\_  
NRCS Technical Adequacy Signature

\_\_\_\_\_  
Date

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