6-1-2026

Wisconsin FY27 Environmental Quality Incentives Program (EQIP)

Standard Workload Prioritization Worksheet

Applicant Name:	County:
Application Number:	Field Office:
Evaluator Name:	Date:

1. The applicant has been an active participant in the planning process and has responded to NRCS with requested information necessary for NRCS staff to continue with ranking?
   - ☐ Yes, continue to Question 2
   - ☐ No, (LOW) <end review>

2. The application includes a practice(s) that requires a Management Plan prior to implementation and has both following requirements: (1) The applicant has a current approved management Plan or has submitted a complete Management Plan for approval AND (2) all designs/implementation requirements are complete and have been submitted for approval by:
   - ☐ The application screening deadline. (HIGH) <end review>
   - ☐ The application ranking deadline. (MEDIUM) <end review>
   - ☐ None of the above or Does not apply, continue to Question 3

3. The application is for practices that DO NOT require a Management Plan prior to implementation, and all designs and implementation requirements are complete and have been submitted for approval by:
   - ☐ The application screening deadline. (HIGH) <end review>
   - ☐ The application ranking deadline. (MEDIUM) <end review>
   - ☐ None of the above. (LOW) <end review>

Designs/IRs do not require signatures from Applicant or NRCS

Required Management Plans = required by National/State policy or Practice Standard (refer to current Payment Schedule Guide)

APPLICATION PRIORITY		
☐ **HIGH**	☐ **MEDIUM**	☐ **LOW**