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**APPLICATION FOR
RESOURCE MANAGEMENT PLAN (RMP) DEVELOPER CERTIFICATION**

**Mail To:**

Department of Conservation and Recreation **For Agency Use Only**

Division of Soil and Water Conservation Date Application Rec’d: For DCR use

P.O. Box 1 Date Additional Information Req’d: For DCR use
Verona, VA 24482 Date Additional Information Rec’d:For DCR use

Tel. (540) 332-9231 Approved: 

FAX (540) 248-3069 Date Approved: For DCR use

1. **APPLICANT**

**Driver’s License ID#:** Click here to enter text.

**Name:** Click here to enter text.

**E-Mail Address:** Click here to enter text.

**Address:** Click here to enter text.

**City:** Click here to enter text.

**State:** Click here to enter text.

**Zip:** Click here to enter text.

**Phone #:** Click here to enter text.

1. **CURRENT EMPLOYMENT/BUSINESS INFORMATION**

**Agency or Business Name:** Click here to enter text.

**Employment Date:** Click here to enter text.

**Address:** Click here to enter text.

**City:** Click here to enter text.

**State:** Click here to enter text.

**Zip:** Click here to enter text.

**Phone #:** Click here to enter text.

**Mobile#:** Click here to enter text.

**Position Held:** Click here to enter text.

**Supervisor:** Click here to enter text.

**Region(s) Served:** Click here to enter text.

**Describe Job responsibilities/daily activities:** Click here to enter text.

**Category of work** (check all that apply)









Click here to enter text.

Click here to enter text.

Click here to enter text.

1. **CERTIFICATION OPTIONS**

Please check the certification option for which you are applying:

[ ] ⁭ **Option 1:** Applicant is applying to become a Certified Resource Management Planner through demonstration of both nutrient management for agriculture and conservation planning certifications. If NRCS conservation planner certification has expired, the applicant must apply under Option 2.

* Current Virginia Agricultural Nutrient Management Certification #Click here to enter text.
* Current NRCS Conservation Planner Certification Click here to enter text.(date of certification)

(Please provide verification)

 Option 1 applicants skip to section 5.

⁭ [ ]  **Option 2:** Applicant holds a valid Nutrient Management certificate and demonstrates academic and applied proficiency in the following:

* Current Virginia Agricultural Nutrient Management Certification #Click here to enter text.
* Please provide a description of your qualifications in section 4.

In order for the application to be considered complete, an Option 2 applicant must provide responses for each academic proficiency and must respond to each applied proficiency question or inquiry.

1. **DEMONSTRATION OF ACADEMIC AND APPLIED PROFICIENCY**

(Complete section 4 only if you are applying for the Option 2 certification option)

1. **NRCS Certified Conservation Planner:**

Have you ever been a certified NRCS Conservation Planner? [ ]  Yes [ ]  No

If yes, when did your certification expire? Click here to enter text.

1. **Agricultural conservation planning:** Applicant must demonstrate their proficiency in the conservation planning process and an ability to identify resource concerns along with the skills to develop a suite of practices suitable to meeting the resource concern and the farmers objectives.

**Academic Proficiency: Please describe applicable training, coursework, etc. in agricultural conservation planning.**

Title: Click here to enter text.
Sponsor: Click here to enter text.

Location: Click here to enter text.
Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

Title: Click here to enter text.
Sponsor: Click here to enter text.

Location: Click here to enter text.
Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

**Applied Proficiencies:**

1. **Please provide a redacted or sample conservation plan (NRCS Toolkit Plan, Chesapeake Bay Plan, or other) that identifies resource concerns, identifies the farmer’s objectives, and includes a list of recommended practices.**
2. **Please describe the capacity in which such conservation planning was accomplished.**

 Click here to enter text.

**Other Applicable Information: Please provide any other information that may be relevant regarding proficiency in agricultural conservation planning.**

Click here to enter text.

1. **State and federal environmental laws, regulations and local ordinances:** Applicant needs to demonstrate their familiarity with NEPA and the various permitting and ordinance requirements that may be encountered when recommending BMPs on agricultural operations**.**

**Academic Proficiencies: Please describe applicable training, coursework, etc. related to state and federal environmental laws, regulations, and local ordinances.**

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

**Applied Proficiencies:**

1. **Describe the methods or resources that you would use to determine whether a local Total Maximum Daily Load (TMDL) affected a land management unit for which you are writing or developing a plan.**

 Click here to enter text.

1. **Describe the tools and resources that you, as a planner, would use to identify threatened and endangered species that could be present on a site for which you are planning.**

 Click here to enter text.

1. **Describe the permits which may be required when installing a stream crossing BMP.**

 Click here to enter text.

**Other Applicable Information: Please provide any other information that may be relevant regarding proficiency in addressing state and federal environmental laws, regulations, and local ordinances.**

 Click here to enter text.

1. **State and federal laws and regulations that address the identification and preservation of historic resources:** Applicant needs to demonstrate a thorough knowledge of NHPA requirements and the mitigation techniques utilized in the planning process.

**Academic Proficiencies: Please describe applicable training, coursework, etc. related to state and federal laws and regulations that address the identification and preservation of historic resources.**

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

**Applied Proficiencies:**

1. **Describe the tools and resources that you as a planner would use to identify historic resources that could be present on a site for which you are planning.**

 Click here to enter text.

**Other Applicable Information: Please provide any other information that may be relevant regarding proficiency in addressing state and federal laws and regulations that address the identification and preservation of historic resources.**

 Click here to enter text.

1. **Standards and specifications for agricultural conservation practices utilized in Virginia and the ability to plan and implement such practices:** Applicant needs to demonstrate a thorough knowledge of the Virginia and federal Cost-Share BMP Programs.

**Academic Proficiencies: Please describe applicable training, coursework, etc. related to agricultural conservation practices utilized in Virginia.**

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

**Applied Proficiencies:**

1. **Name 2 Department of Conservation and Recreation Virginia Agricultural Cost-Share (VACS) Best Management Practices that address soil loss on cropland.**

Click here to enter text.

1. **Name 2 Department of Conservation and Recreation Virginia Agricultural Cost-Share (VACS) Best Management Practices that address soil loss on hayland.**

 Click here to enter text.

1. **Name 2 Department of Conservation and Recreation Virginia Agricultural Cost-Share (VACS) Best Management Practices that address soil loss on pasture.**

Click here to enter text.

1. **List and provide a brief description for both the state and federal funding sources available for installing or implementing agricultural BMPs in Virginia.**

Click here to enter text.

**Other Applicable Information: Please provide any other information that may be relevant regarding proficiency and knowledge of standards and specifications for agricultural conservation practices utilized in Virginia.**Click here to enter text.

1. **Soil erosion processes and skill in applying approved erosion prediction technologies including the applicable current United States Department of Agriculture Revised Universal Soil Loss Equation:** Applicant should be certified in RUSLE 2 from NRCS or able to demonstrate a thorough knowledge of the RUSLE 2 computer program, identify the types of erosion, identify the applicability of the model, and be able to show an understanding how various practices influence the resulting soil loss predictions.

**Academic Proficiencies: Please describe applicable training, coursework, etc. related to the fundamentals of soil erosion processes and applying erosion prediction technologies.**

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

**Have you completed the NRCS Basic Erosion Process 2-day workshop and received NRCS basic RUSLE 2 Certification?** [ ]  Yes [ ]  No

**Applied Proficiencies:**

1. **In agricultural situations, climate, soil and topography are dependent on the location and considered to be “fixed” because they cannot be changed. What factors utilized in calculating soil loss can be changed in order to reduce soil loss?**Click here to enter text.
2. **Provide a before/after scenario report generated by RUSLE 2. The “before” scenario should demonstrate how a standard management style on a given field(s) does not meet “T”. The “after” scenario should demonstrate how the implementation/installation of agricultural BMPs will reduce soil loss to “T” on the same field(s).**Click here to enter text.

**Other Applicable Information: Please provide any other information that may be relevant regarding proficiency and knowledge of soil erosion processes and applying erosion prediction technologies.**Click here to enter text.

1. **The fundamentals of water quality and nonpoint source pollution:** Applicant needs to demonstrate a thorough knowledge on nonpoint source pollution, its effect on water quality, and management practices to control nonpoint source pollution.

**Academic Proficiencies: Please describe applicable training, coursework, etc. related to the fundamentals of water quality and nonpoint source pollution.**

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

**Applied Proficiencies:**

1. **Identify potential agricultural sources of sediment, nutrient, and bacteria that may be delivered to surface and ground water and identify the pathway by which these may be delivered.**

 Click here to enter text.

**Other Applicable Information: Please provide any other information that may be relevant regarding proficiency and knowledge regarding water quality and nonpoint source pollution.**

 Click here to enter text.

1. **The fundamentals of pest management:** Applicant needs to have a basic knowledge of pest management and be able to identify situations where pest pressure is significantly impacting the environment.

**Academic Proficiencies:**

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

**Applied Proficiencies:**

1. **Do you currently, or have you ever, held a VDACS-issued pesticide license in any category?** [ ]  Yes [ ]  No

**If yes, please state the category number of the license and license expiration date.**

 Click here to enter text.

1. **Describe a situation in which a pest problem would influence your recommendations in the nutrient management or soil conservation component of an RMP plan. What actions would you take?**

Click here to enter text.

**Other Applicable Information: Please provide any other information that may be relevant regarding proficiency and knowledge of pest management.**Click here to enter text.

1. **The fundamentals of fire management:** Applicant needs to demonstrate knowledge of the fundamentals of fire management.

**Academic Proficiencies: Please describe applicable training, coursework, etc. related to fire management.**

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

**Applied Proficiencies:**

1. **Name 3 benefits of controlled burning and a scenario in which it may be applicable.**

 Click here to enter text.

**Other Applicable Information: Please provide any other information that may be relevant regarding proficiency and knowledge of fire management.**

 Click here to enter text.

1. **Site vulnerability assessment tools:** Applicant needs to demonstrate the ability to apply site assessment tools such as the Phosphorus Index and Leaching Index.

**Academic Proficiencies: Please describe applicable training, coursework, etc. related to site vulnerability assessment tools.**

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

Title: Click here to enter text.

Sponsor: Click here to enter text.

Location: Click here to enter text.

Date(s): Click here to enter text.

Total Hours of Instruction: Click here to enter text.

**Applied Proficiencies:**

1. **Under the current Nutrient Management Standards and Criteria, describe the acceptable phosphorous management procedures and describe the situation in which each can be used.**

 Click here to enter text.

1. **How would you determine the risk to groundwater from nitrogen applications on a specific soil type?**Click here to enter text.

**Other Applicable Information: Please provide any other information that may be relevant regarding proficiency and knowledge of site vulnerability assessment tools.**

 Click here to enter text.

**Education and Experience**

1. **Education**: Please attach a photocopy of college transcripts if you are using your degree to demonstrate academic proficiency. **(See Section 4 VAC 50-70-140.)**

College or University/City: Click here to enter text.

Years Completed: Click here to enter text.
Degree & Major Field of Study: Click here to enter text.

Date Graduated: Click here to enter text.

College or University/City: Click here to enter text.

Years Completed: Click here to enter text.
Degree & Major Field of Study: Click here to enter text.

Date Graduated: Click here to enter text.

1. **Experience: Additional Conservation Planner Experience.** Please list any professional work experience or volunteer work related to conservation planning.

Agency or Business Name: Click here to enter text.
Phone: Click here to enter text.

Address: Click here to enter text.

City: Click here to enter text.

State: Click here to enter text.
Zip: Click here to enter text.

Position Held: Click here to enter text.

Supervisor: Click here to enter text.

Employed from: Click here to enter text.to: Click here to enter text.

Describe Job responsibilities/daily activities:

 Click here to enter text.

Use this space for any additional information that is related to Conservation Planning experience which may assist in determining your eligibility to become a certified RMP developer:

 Click here to enter text.

**4**. **CERTIFICATION STATEMENT**
I hereby apply for Resource Management Planner (RMP Developer) certification in accordance with the provisions of § 10.1-104.8 of the Code of Virginia, agree to comply with the Resource Management Plan program laws and regulations, and certify that the above information is true and accurate to the best of my knowledge. Should I be issued an RMP Plan Developer Certificate, I also authorize the Department to utilize my name, address, phone number, e-mail address, and RMP Developer certificate expiration date in RMP program related promotional and informational materials, lists, web pages, and associated communications.

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Applicant’s Signature Date