

REQUEST FOR FORM APPROVAL

NOTE: A copy or draft of proposed new or revised form must accompany this request.

Proposed Form Title:	THIS SPACE FOR USE OF FORMS MANAGER	
	Form Title:	
	Form No.	Date:
New <input type="checkbox"/> Revised <input type="checkbox"/> Cancellation <input type="checkbox"/>	<i>All Forms will be located on the WV NRCS Web Page Upon approval.</i>	
Brief Description of Use:		
List of Forms Superseded:	<u>Form Designed for Use In:</u>	
	State Office <input type="checkbox"/> Area Office <input type="checkbox"/> Field Office <input type="checkbox"/> Other <input type="checkbox"/>	
State Office Form Approval		
Requested By:	Date:	REMARKS:
Approved By: (Program Manager)	Date:	REMARKS:
Forms Manager:	Date:	REMARKS:
Supervisor (ADS):	Date:	REMARKS:
State Conservationist:	Date:	REMARKS:

Upon State Conservationist approval, a final version of the form will need to be submitted in final PDF format to the Forms Manager by e-mail or on disk.