

2008 Weed Management Area Site Visits

Cover sheet

WMA Group:

Date:

County(-ies) Involved in the Group:

Person Conducting Site Visit:

- **WMA formed and functioning since (list year):** _____
- **MOU Status (circle one):** up-to-date In process of being renewed No MOU
- **Strategic Plan (circle one):** up-to-date In process of being renewed No Strategic Plan

General Description of the Weed Management Area and its successes (within your description, please rank the WMA as: Superior, Good, Adequate, or Needs Improvement):

General failures, problems, or concerns with the WMA in implementing projects as described in their work plan:

PROJECT EVALUATION FORM

Project title (Complete one PROJECT EVALUATION form PER Project in WMA Work plan):

Weed Species Addressed:

Project Brand New or On-going (indicate year project initiated):

Control Techniques Used (what has worked, what has NOT worked):

Monitoring- Describe techniques used to generate reportable successes or failures:
(ie: % change in number of plants, % cover, or net acres treated between years, change in net/gross acres surveyed or treated between years, transect data, photos, etc.)

Were maps generated for this project (indicate type of maps) and have maps been helpful in implementing AND demonstrating project progress?

List Cost-share or other leveraged funds for this project:

List any education outreach type activities associated with this project: