

# Regenerative Rice Field GAP Assessment

Farmer Name

Assessment Date

Location

Field Area (ha)

Rice Variety

Previous Crop

## GAP Assessment Checklist

Criteria
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Yes
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No
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Notes
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Soil health management practices implemented	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Use of cover crops & crop rotation	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Minimized use of chemical inputs	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Water management (efficient irrigation, alternate wetting and drying)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Integrated pest management practices	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Biodiversity enhancement measures (e.g. field margins, hedgerows)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

Field Observations

Recommendations

Assessor Name