



OSHP ENROLMENT CHECK LIST

OSHP Binder to be sent to owner must include:

| NAME OF FORM | # OF PAGES | # OF COPIES | COPIES TO BE RETAINED BY |
|---|------------|-------------|--|
| Cover letter | 1 | 1 | owner |
| Instructions | 1 | 1 | owner |
| OSHP-CHECKLIST | 1 | 1 | owner |
| Divider for each year | 1 | 1 | |
| OSHP-SUM | 1 | 3 - NCR | OSMA / owner / veterinarian |
| FHM-SUM | 2 | 3 - NCR | OSMA / owner / veterinarian |
| FHM-ASSESSMENT | 6 | 2 - NCR | owner / veterinarian |
| BIOSEC-STATUS | 1 | 3 - NCR | OSMA / owner / veterinarian |
| BIOSEC-ASSESSMENT | 2 | 2 - NCR | owner / veterinarian |
| FP-DATA | 3 | 2 - NCR | owner / veterinarian |
| FP-CALC&GOALS | 3 | 3 - NCR | OSMA / owner / veterinarian |
| Figure 1. 12 Month Period | 1 | 1 | owner |
| Lamb Necropsy Form | 1 | 1 | owner (for duplication) |
| Feed Prescription Form | 1 | 1 | veterinarian (for duplication) |
| Explanation of Productivity | 3 | 1 | owner |
| Microsoft Excel Spreadsheet: OSHP_productivity_calculation.xls ¹ | NA | 1 | Enter data and rename using Owner's name & date completed e.g. John_Smith_May24_06.xls. Send copy to OSMA. |

NCR = no carbon required

¹ If the Excel spreadsheet is used, then it is not necessary to submit a copy of FP-CALC&GOALS. The completed spreadsheet can be copied onto the floppy disk, onto a CD or can be emailed to OSMA at the address: projects@ontariosheep.org.