

National Shipbuilding Research Program Rapid Adoption Project (RAP)		1. DATE PREPARED <i>(DD Mmm YYYY)</i>	2. RAP NUMBER (ATI assign):	2a. RAP REVISION:	
		2b. BUSINESS SENSITIVE:		YES	NO
3. PROJECT TITLE:					
4. RAP TYPE: P - Preliminary F - Final					
5. DESCRIPTION OF PROBLEM OR ISSUE:					
6. DESCRIPTION OF SOLUTION:					
7. PRIMARY SHIP WORK BREAKDOWN STRUCTURE (SWBS) (if known):		8. SECONDARY SHIP WORK BREAKDOWN STRUCTURE (SWBS) (if known):		9. STARTING TRL	
10. GOVERNING DOCUMENTS AFFECTED * = if known			d. CURRENT REVISION *	e. NOR NO. *	f. REVISED DOCUMENT REQUIRED? (Y/N)
a. COGNIZANT AGENCY.*	b. DOCUMENT NO.*	c. TITLE/NOMENCLATURE/NAME			
11. LIST CURRENT COMMERCIAL USE AND COMMERCIAL/OTHER GOVT/CLASSIFICATION SOCIETY CERTIFICATIONS OR APPROVALS:					
12 (a). PROVIDE THE SHIP HULL #, AND CLASS OF THE SHIP, OR SHIPYARD PROCESS, INTENDED FOR TESTS OR DEMONSTRATIONS DURING THE RAP, OR INTENDED FOR IMMEDIATE IMPLEMENTATION UPON COMPLETION. (If none, so state.) 12 (b). ENTER ALL CURRENT AND FUTURE US NAVY PLATFORMS THAT WILL BE AFFECTED BY IMPLEMENTATION THIS RAP.					
13. FOR SOFTWARE SOLUTIONS (if applicable): PROVIDE DESCRIPTION OF PROPOSED DEVELOPMENT EFFORT (INCLUDING NEW CODE OR FUNCTIONALITY VERSUS EXISTING CODE/FUNCTIONALITY)					

14. DESCRIBE THE EXPECTED MEASURABLE BENEFICIAL IMPACT OF THIS RAP. QUANTIFY AND INCLUDE ASSUMPTIONS/ESTIMATES:		
15. LIST PROPOSED PROJECT TEAM PARTICIPANTS, INCLUDING SHIPYARDS:		
16. PROJECT LEAD	a. NAME:	d. ADDRESS: <i>(Street, City, State, Zip Code)</i>
	b. TELEPHONE:	
	c. E-MAIL:	

e. SUBMITTING ACTIVITY:	f. NAME AND TITLE <i>(Authorizing Official)</i>
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17. BELOW TO BE COMPLETED BY THE PARTICIPATING SHIPYARD		
a. CONCURRENCE:	YES	NO
b. NAME AND TITLE	c. DATE SIGNED: (DD Mmm YYYY)	

d. COMMENTS ON INTERNAL CHANGES FOR IMPLEMENTATION WITHIN SHIPYARD:

e. OTHER COMMENTS:

18a. BELOW TO BE COMPLETED BY NAVY:	Approval	Disapproval
	Approval with Modification	No Prohibition

b. NAME AND TITLE	c. DATE SIGNED: <i>(DD Mmm YYYY)</i>
d. COMMENTS:	

19. FINAL APPROVAL SIGNATURE:

