IDAHO STATE SEED LABORATORY

SAMPLE SUBMISSION FORM

Clear Form

Print

*** MANDATORY FIELDS**

DATE:

*** COMPANY NAME:**

*** PHONE:**

***ADDRESS:**

*** EMAIL:**

*** CONTACT PERSON:**

*** LOT NUMBER:**

CROP YEAR:

*** SPECIES/CROP:**

ORIGIN:

VARIETY:

LOT WEIGHT:

*TREATMENT:

BATCH #:

Your company reference

*** SEED CLASS:**

- ☐ SERVICE/UNCERTIFIED
- ☐ CERTIFIED
- ☐ FOUNDATION
- ☐ REGISTERED
- ☐ SOURCE ID

OTHER, SPECIFY:

Noxious exams will not be conducted unless selected on the sample submission form or ICIA testing is selected.

*** TESTS:**

- ☐ PURITY
- ☐ CANADA PURITY (including noxious)
- ☐ GERMINATION
- ☐ CANADA GERMINATION
- ☐ TZ
- ☐ ICIA (includes purity and ID noxious)

OTHER, SPECIFY:

***NOXIOUS:**

- ☐ ALL STATES
- ☐ WESTERN
- ☐ IDAHO
- ☐ CANADA

OTHER, SPECIFY:

SERVICES:

- ☐ RUSH
- ☐ SUPER RUSH
- ☐ RETURN SAMPLE
- ☐ PURITY FIRST

OTHER, SPECIFY

SENDER INFO: *Information will appear on the report*

OTHER: *e.g., CC add'l email addresses*

Mandatory for Idaho Crop Improvement Association Samples

ICIA SAMPLER:

GROWER:

FIELD # :

CERT # :

ADDITIONAL SAMPLES: *Multiple samples can be submitted on this form if most of the infomation is the same*

CROP & VARIETY | LOT NUMBER | NOTE