**Plant Sample Submission Form**

**Crop and crop variety:**

**GENERAL OBSERVATIONS**
Please provide any general observations about the plant (e.g., health, color, size, any noticeable pests or diseases):

**GROWER INFORMATION**

* **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Farm/Company Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Contact Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Email Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Geographic Coordinates**
Please provide the geographic coordinates (latitude and longitude) where the plant sample was collected:

* **Latitude:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Longitude:**
* **Or, county**

**Approximate Distance to the Nearest Grazing Land:**

**Shipping Instructions:**

1. Please send the entire plant with its roots covered in a small amount of soil to keep them fresh.Include this completed form in the package or email a copy of it to shparizad@vt.edu.

**Shipping Address:**

Dr. Arash Rashed/ Shirin Parizad

Southern Piedmont Agricultural Research and Extension Center

2375 Darvills Rd, Blackstone, VA 23824

If you have any questions or need further assistance, please contact us at shparizad@vt.edu.

Thank you for your cooperation.