

# 2023 UW/WSMB Nematode Soil Sample Information Form

Please read these instructions

Complete this form and mail with your soil sample.  
 One sample form must accompany each soil sample.  
 All samples must have a grower name and address.

**\*Please write legibly and provide as much information as available\***

Send Results to: Grower  Submitter  Both

### Submitter Contact Information

Business \_\_\_\_\_  
 Submitter Name \_\_\_\_\_  
 Submitter Email \_\_\_\_\_

### Grower Information

Grower Email \_\_\_\_\_  
 Farm Name \_\_\_\_\_  
 Grower Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 County \_\_\_\_\_  
 Phone \_\_\_\_\_

UW Sample Kit Number	Pest Pros Lab Number
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**Submit samples and this form  
using the postage-paid envelope  
to:**

Pest Pros  
 P.O. Box 188  
 Plainfield, WI 54966-0188

### Field Information

County location of field (required)	Latitude of field
Township of field	Longitude of field
Last year's crop	This year's crop
Variety name of this year's or most-recent soybean crop	
Field name or number (use actual field number if available)	

Soil Texture    Sand    Sandy Loam    Silt Loam    Loam    Clay    Clay Loam

Has this field ever been tested for presence of SCN?    Yes    No

Do you suspect SCN to be present in this field?    Yes    No

Special notes about this field or sample \_\_\_\_\_

**This nematode testing kit is provided to you by**

**UW Department of Agronomy**  
 1575 Linden Drive  
 Madison, WI 53706  
 608-220-2693  
 www.coolbean.info  
 freescntest@mailplus.wisc.edu



Lab results provided by:



**WI Soybean Marketing Board**  
 4414 Regent St., Suite 204  
 Madison, WI 53705  
 608-274-7522

