

## **Seedling Quality Submission Form**

## **Contact Information** Dated Submitted \_\_\_\_\_ Name: Email: Nursery Location Company\_\_\_\_\_ Also send a copy of report to: **Sample Information:** (Fill in completely for each sample) Sample Identification Number (6 Characters or less) Species (circle one): Loblolly Slash Longleaf Sand other Stock Type (circle one) Bareroot Container Province: Coastal \_\_\_\_\_ Upper Coastal\_\_\_\_\_ Piedmont \_\_\_\_\_ Genetics: 2<sup>nd</sup> Gen \_\_\_\_\_

Lifted by (circle one) hand machine

3<sup>rd</sup> Gen \_\_\_\_\_ Advanced \_\_\_\_\_

Other Information