



Soil Sample Submission Form

Please complete all sections of this form and attach any additional information to the form. Send form along with soil samples.

CONTACT INFORMATION
 Name: _____
 Address: _____
 City, State, Zip code: _____
 Phone: _____ Email: _____
 How would you like to receive the results?
 Phone Call
 Email
 Text Message

OSU STAFF ONLY
 Sample ID #: _____
 Received by: _____
 Date Received: _____
 Processed by: _____
 Date Complete: _____

SAMPLE INFORMATION
 Field ID: _____ Date Collected: _____
 Current Crop: _____ Previous Crop: _____
 GPS of field or road intersection*:

 County: _____ Field Size (acres): _____
Soil Collection- Please follow the SCN Coalition’s method of collecting 15-20 (or more) 1-inch diameter core samples, 8 inches deep.
 More info can be found at:
www.TheSCNcoalition.com or <https://u.osu.edu/ohscn/>
Please place soil in a plastic bag under cool, dry conditions.
 *GPS coordinates will NOT be used for reporting & will be for University use only.

Additional information:

SUBMISSION INFORMATION

OSU Soybean Pathology and Nematology Laboratory
 Attn: Horacio Lopez-Nicora
 110 Kottman Hall
 2021 Coffey Rd.
 Columbus, Ohio 43210
lopez-nicora.1@osu.edu

OR

Drop off samples at one of the OSU OARDC Stations:

Northwest Research Station
 4240 Range Line Rd.
 Custar, OH 43511

Western Research Station
 7721 S. Charleston Pike
 South Charleston, OH 45368

North Central Research Station
 1162 Gonawein
 Fremont, OH 43420