



The University of Georgia
College of Agricultural and Environmental Sciences
Cooperative Extension Service

Crop & Environmental Quality Lab
2300 College Station Rd.
Athens, GA 30602
706-542-9023

LAB USE ONLY	LAB #
Date Received: _____	
Received By: _____	
Date Reported: _____	
Invoice #: _____	
Invoice Amount: _____	

UGA Onion Flavor Testing Submission Form

Please retain a copy of this form for your files. Submit one copy per sample.

Name: _____ Phone: _____

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Sample ID: _____ Submission Date: _____

Additional Information (Optional)

Onion Information

Onion variety: _____

Date transplanted: _____

Previous crop: _____

Soil Information

Soil test results prior to planting (if available):

Soil Lab Number: _____

P (lb/A) _____

K (lb/A) _____

S (lb/A) _____

Soil type: _____

Were the samples (circle one):

fresh pulled field dried artificially dried

Season-long fertility program:

N fertilizer applied, lb N per acre: _____

P fertilizer applied, lb P₂O₅ per acre: _____

K fertilizer applied, lb K₂O per acre: _____

S fertilizer applied, lb S per acre: _____

Irrigation (approximate inches applied this calendar year): _____

Date of last application of any fertilizer material (nitrogen or otherwise): _____

Comments: