



CSU Plant Diagnostic Clinic

online plantclinic.agsci.colostate.edu

email plantlab@colostate.edu

phone 970-491-6950

Mail to:

Plant Diagnostic Clinic
1177 Campus Delivery
Colorado State University
Fort Collins, CO 80523-1177

Sample Submission Form

Client Information

(Name)

(Business/Organization)

(Billing address)

(City/state/zip code)

(Phone number)

(Email address)

Basic Services

General disease diagnosis

Plant identification

Molecular disease diagnosis

Insect identification

Other: _____

Sample Information

(Date collected)

(Date submitted)

(County collected)

(Plant name)

(Plant variety)

(Location: yard, field, etc)

Symptoms & History *(please describe symptoms and plant care; fertilizers, pesticides, water used, etc)*

Please send digital images of samples and symptoms to: plantlab@colostate.edu

You will receive a report and an invoice for payment once diagnosis is complete.

Date Received by Clinic _____

For clinic use only

Clinic notes:

CSU Sequence #