

THIS FORM MUST BE TYPED
BEFORE SUBMITTING

**The University of Arizona
Agricultural Experiment Station
FARM SERVICES AGREEMENT ⁽¹⁾**

Accession No.⁽²⁾ _____

DEPARTMENT(s): _____

PROJECT TITLE ⁽³⁾: _____

MAILING ADDRESS: _____ PHONE: _____

OBJECTIVES: _____

PERSONNEL:

1. Professional _____
2. Technical _____

FUNDING: _____ Farm Account # _____ Amount \$ _____
_____ Project Account # _____ Amount \$ _____

LOCATION: Station: _____ Location & Acreage: _____

Date of planting or initiation: _____ Approx. Completion Date: _____

Do the activities of this project require approval by the Institutional BioSafety Committee? ____ YES ____ NO

PROCEDURE AND MATERIALS: (give details, including experimental design. Use and attach additional pages if needed)

¹ Agreement must be completed in full and signed at least annually, before work can be initiated.

² Assigned by the Deans's Office.

³ Must correspond to approved project, demonstration or teaching plan on file in Dean's Office unless prior arrangements have been made with Farming Superintendent and approved by the Dean's Office.

APPROVED:

Project Leader Date Resident Director Date

Department Head Date Director/Experiment Station Date

Farm Superintendent Date

Please fill out next page - The Crop Productivity Responsibility Section

CROP PRODUCTIVITY RESPONSIBILITY

PROCEDURES:	REMARKS:	PROJECT LEADER:	FARM:
FIELD PREP:			
Land Prep.			
Planting			
Seed Cost			
Cultivations			

IRRIGATIONS			
Sprinklers			
Labor			
Water Cost			

CHEMICALS:			
Fertilizers			
Insecticides			
Herbicides			
Fungicides			

HARVEST:			
Equipment			
Labor			

ADDITIONAL REMARKS:

FARM SUPERINTENDENT

PROJECT LEADER