



PLANT IDENTIFICATION FORM

Schutter Diagnostic Lab
119 Plant Biosciences Facility
P.O. Box 173150
Montana State University
Bozeman, MT 59717

Date _____

Client Name _____ Email _____

Address _____ Phone _____

City _____ ZIP _____

1. Sample collected by: _____ Phone: _____

Address: _____

2. In which county was the sample collected? _____

Nearest to what Montana city, town, or major landmark? _____

If not Montana, specify where: _____

3. Sample was collected in this habitat (=PDIS "host"): (circle proper item or specify below)

cropland lawn garden house pasture forest roadside rangeland aquatic

crop-field: crop = _____ other: _____

4. Sample is from this form of plant: (circle proper item)

grass herb (wildflower/forb) vine shrub tree moss other

5. If roots are not included in the sample, does the plant appear to be rhizomatous? Rhizomes are stems that grow horizontally below ground and send up new shoots at some distance from the parent plant, meaning the plants typically grow in clusters, rather than as solitary individuals. _____

6. Information on habitat can expedite identification. Please include any available information on canopy cover (full sun, part shade, full shade), and soil moisture levels (e.g. plant was growing in moist low lying area, or dry exposed, south facing slope).

7. Prevalence: (circle proper item) few or just one scattered abundant

8. Other plant information: _____

9. Email identification info: yes no

Email address (if different from above): _____

Submitting several entire plants with flowers and fruit will ensure accurate and prompt identification. Please call 406-994-6297 or refer to "Plant Identification" website at <http://diagnostics.montana.edu/Plant/> for instructions on how to submit samples to the clinic.

Agent _____ County _____