

Association of Official Seed Certifying Agencies
Application for Pre-Variety Germplasm*
(See attached INSTRUCTIONS)

Applicant _____

Address _____

Telephone _____ Fax _____ E-mail _____

A. Germplasm Originator _____ Germplasm Developer _____

Germplasm Identification Term _____ Indigeneity _____

Germplasm Type (SI, S, or T) _____ Genetic Track _____

Species: Common Name _____ Latin Name _____

Primary Use _____

B. Origin and Development History

C. (1) Botanical (morphological characters) description

(2) Objective (performance claims) description

D. Evidence (numerical data, graphs, charts, etc.) supporting the morphological characters and performance claims of the germplasm.

E. Area of adaptation

F. **Source location information. Include State, County, and elevation or other geographic designation for Natural Track G0 or Manipulated-Track G1**

G. Procedure for maintenance of stock seed

H. Generations, age of stand, or geographic limitations

I. Sample of seed (if required by certifying agency)

Signature of Applicant

Date

* Form may be modified to meet individual agency needs