

Schedule "A"

Plot Variety Trial Program Application Form

Applicant Information:

- Name: _____
- Address: _____
- Mailing Address: _____
- Phone Number: _____
- Email Address: _____
- Crop(s) of Interest: _____

Project Details:

Objective of the Trial: [Briefly describe the main goal(s) of your plot variety trial program.]

Varieties to be Tested: [List the specific varieties you intend to test in your trial.]

Location(s) of Trial: [Specify the field(s) or location(s) where the trial will be conducted.]

Plot Design: [Describe how you plan to lay out your plots (e.g., strip plots, blocks, etc.)]

Expected Timeline: [Outline the timeline for planting, maintenance, data collection, and harvesting.]

Budget and Funding:

Total Budget for the Project: [Specify the total estimated cost of the trial.]

Funding Requested: [Total amount of funding you are requesting from the ASB (maximum is \$500).] _____

Application Completion:

- I hereby apply for funding support from the Agricultural Service Board for the plot variety trial program described above.
- I agree to comply with all reporting requirements as outlined by the Agricultural Service Board.
- I understand that funding is contingent upon approval by the Agricultural Service Board and submission of required documentation.
- I agree that upon completion of the harvest and Results Report, the County may share the report with the agricultural community at-large via social media, email, publications or other means of communication.
- I understand that 50% will be paid up-front upon approval, and the remaining 50% will be issued upon harvest/completion and submission of a Results Report.

Signature: _____ **Date:** _____

Instructions for Submission:

- Complete all sections of this application form.
- Attach any additional supporting documentation as needed (e.g., project proposal, detailed budget).
- Submit the completed application via email to: agriculture@laclabichedcounty.com or mail to:

Attn: Agricultural Services
Lac La Biche County
Box 1679
Lac La Biche, AB ToA 2Co

Notification:

- You will be notified of the status of your application within fifteen (15) days of submission.

Questions? Please Contact:

- For questions or assistance regarding this application, please email: agriculture@laclabichedcounty.com or call (780) 623 6739.

Collection Statement:

“Your personal information is being collected under the authority of Section 33(c) of the Freedom of Information and Protection of Privacy Act. The information is being collected for the purposes of the Plot Variety Trials Program. If you have any questions about the collection and use of this information, please contact the FOIP Coordinator for Lac La Biche County at (780) 623-1747.”

Schedule "B"

Plot Variety Trial Program Results Report Form

Trial Information:

Producer Name: _____

Location: _____

Crop(s) Tested: _____

Varieties Tested: [List the varieties tested in the trial.] _____

Date of Report: _____

1. Methods:

- **Location and Soil Conditions:** [Provide details about the trial location and soil characteristics.]

- **Planting and Maintenance:** [Outline how planting was conducted, any specific maintenance practices, fertilizer(s) used, and pest/disease management.]

2. Results:

- **Growth and Development:** [Summarize the growth stages observed for each variety.]

- **Yield Data:** [Present yield data for each variety (e.g., average yield per plot, total yield per variety).]

- **Quality Assessment:** [Include any quality assessments conducted (e.g., disease resistance, grain quality).]

- **Other Observations:** [Note any other relevant observations made during the trial (e.g., plant vigor, environmental factors).]

3. Discussion:

- **Comparison of Varieties:** [Discuss the performance of each variety relative to others tested.]

- **Implications for Agriculture:** [Explain the practical implications of the trial results for local farmers or the agricultural community.]

4. Conclusions:

- **Key Findings and Variety Recommendations:** [Summarize the main findings of the trial and your recommendations.]

- **Next Steps:** [Outline any recommendations for future trials or research.]

5. Acknowledgments: [Acknowledge any individuals, organizations, or funding sources that contributed to the trial.]

6. Attachments (if applicable) please include any photos, charts, graphs that you have pertaining to the trial.

Report Completed By: _____

Signature: _____ **Date:** _____

Submission:

Please email: agriculture@laclabichedcounty.com or submit the Results Report in-person to Lac La Biche County Centre, at 13422 HWY 881, Lac La Biche, AB or mail a hard copy to:

Attn: Agricultural Services
Lac La Biche County
Box 1679
Lac La Biche, AB ToA 2Co

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