

Harris Seeds

Grower Trial Evaluation

Customer #:	
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Grower Name:	
Trial Location:	
Trial Conditions: <small>(overall season weather, notable weather, etc.)</small>	

Market Type:	
Evaluated By:	
Evaluation Date:	

Genus, Variety:			
Date Planted:		Quantity Planted:	

Ratings: Please rate the following characteristics to the best of your ability. Please circle the number corresponding to your rating.

Characteristic	1= Awful	2= Poor	3= Average	4= Good	5= Excellent	Comments
Germination	1	2	3	4	5	
Seedling Vigor	1	2	3	4	5	
Plant Habit	1	2	3	4	5	
Fruit Quality	1	2	3	4	5	
Fruit Flavor	1	2	3	4	5	
Yield	1	2	3	4	5	
Uniformity	1	2	3	4	5	
Disease Resistance	1	2	3	4	5	
Marketability	1	2	3	4	5	

Would you grow this variety again?
(Check one box)

YES	NO

Why or Why Not: _____

Other Comments: _____

Return this form to the Trials Manager, Christine O'Loughlin
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