



UNIVERSITY OF WYOMING EXTENSION

To submit an insect sample for diagnosis or identification, please print and fill out this form as completely as possible. Insects should be packaged in a manner that ensures they arrive in good condition. Insect samples mailed in envelopes are often damaged and unrecognizable when they arrive. Send this form with your sample to:

Scott Schell
Department 3354
1000 E. University Ave.
Laramie, WY 82071

INSECT OR ARTHROPOD ID

Client Name:

Client Contact Information:

Phone _____

Email _____

Mailing Address:

Where did you find the insect? (plant, crop, kitchen, etc)?

Date Collected _____

Pest is: ___ a nuisance? ___ causing damage? ___ a curiosity?

Damage is: ___ extreme ___ serious ___ moderate ___ light

Parts of the plant attacked: ___ leaves ___ stems ___ roots ___ buds
___ flowers ___ branches ___ trunk ___ fruit

Has control been attempted? If so, describe:

Observations/comments: