



FORM A SOYBEAN YIELD SURVEY

SEGMENT _____ TRACT _____

Initial Interview 2011



**NATIONAL
AGRICULTURAL
STATISTICS
SERVICE**

YEAR, CROP, FORM, MMDD (1 - 7) _ _ _ _ _	Region, State, District	POID	Sample	Page of
--	-------------------------	------	--------	---------

Date: _____

We are now collecting information to help determine crop production this year. Response to this survey is voluntary; however, we need and appreciate your cooperation. Any data reported by you or obtained from field observations will be kept confidential.

Starting Time (Military Time) 171

JAS PLANTED TRACT ACRES

101

DO NOT CHANGE

1. Around June 1, you had planted or intended to plant acres of soybeans in _____ field(s) in this tract.

Show operator his tract and fields on PHOTO. Verify the fields and the acreages of soybeans planted in the tract and entered in Table A.

If no soybeans planted in tract, correct Table A and return all Forms.

Record the acreages of soybeans to be harvested for beans in Column 6 and ADD to total.

TABLE A

FIELD NUMBER (Sample field number has ##)	TOTAL ACRES IN FIELD	ACRES PLANTED TO SOYBEANS	Acres in USES or CROPS OTHER THAN SOYBEANS to be harvested for beans. <i>(For example: ditches, fence rows, waterways, roads, other crops, etc.)</i>		ACRES OF SOYBEANS TO BE HARVESTED FOR BEANS <i>(Col. 2 minus Col. 5)</i>
			USE	ACRES	
1	2	3	4	5	6
	. ____	. ____		. ____	. ____
	. ____	. ____		. ____	. ____
	. ____	. ____		. ____	. ____
	. ____	. ____		. ____	. ____
	. ____	. ____		. ____	. ____
	. ____	. ____		. ____	. ____
	. ____	. ____		. ____	. ____
		112			. ____

2. The total soybean acreage (column 6) to be harvested for beans in this tract is ACRES 102 . ____

Verify that the ACREAGE is correct. If NOT, RE-ADD.

IF ITEM 2 HAS { -- A ZERO entry – Return all forms.
-- An Acreage entry – CONTINUE.

a. Were soybeans planted in field number _____ greater than zero?

YES – Continue on back page.

NO – Did you list a NEW FIELD in Table A that is intended for harvest for beans?

YES – This new field is now the sample field. If you listed 2 or more new fields, choose the one closest to the originally selected field. Continue on back page.

NO – Conclude interview, record Form A ending time, and return all forms.

FORM A: SOYBEANS--Continued

All questions on this page apply to SAMPLE FIELD ONLY.

3. Copy acres of soybeans for beans in Sample Field Number _____ from Table A, column 6

ACRES	103
INCHES	110

4. What was the row width (planter setting) for the soybeans planted in this sample field?

ENUMERATOR NOTE: If this is an odd-numbered sample and the planted row space is less than or equal to 18 inches, lay out the sample unit and complete the Row Space Measurements, but do not complete the Form B counts for the August 1 survey.

5. Has this field been (or will it be) irrigated? YES = 1 DON'T KNOW = 2 NO = 3

CODE 114

6. On what date was planting completed in this soybean field?

MM DD 107

7. (Show Respondent Show Card)
What variety are the soybeans in the selected field? _____

ENTER CODE 130

ARKANSAS ONLY:

8. What Maturity Group are the soybeans in the selected field?

2 Group II	6 Group VI
3 Group III	7 Group VII
4 Group IV	8 Don't Know
5 Group V	

CODE 108

9. With your permission I will go out to the field and mark off two small plots to be used in making plant and fruit counts. I will return to the plots each month until harvest to make counts and measurements, and harvest and weigh a few beans. Would that be all right?

- YES -Continue. If this is a gleaning sample, tell the operator,
"After harvest, I will also lay out two small plots to determine harvest loss."
- NO - Conclude interview and return all forms.

a. The United Soybean Board (USB) has requested the soybean samples after NASS has completed their yield analyses. USB would like the sample and variety to analyze compositional traits such as oil and protein to increase the value of U.S. soybeans.

Do we have your permission to provide your soybean sample to USB?

YES = 1 NO = 3

CODE 131

10. Have you or will you apply pesticides with organophosphorous content to the sample field?

- YES
- DON'T KNOW
- NO

If YES, enter latest application date _____ and name of pesticide _____.

11. Respondent Name _____

IMPORTANT: Review for completeness. Record ending time and sign name. Record operator's telephone number, expected harvest date, and pesticide intentions (item 10), on your kit envelope.

Ending Time (Military Time)	172
Enumerator Number	190
Supervisor Number	191
Evaluation	193
R. Unit	921

12. Enumerator Name: _____

STATUS CODE 180