|  |  |
| --- | --- |
| Project Code 104 QID 120032 A  |  OMB No. 0535-0088: Approval Expires 7/31/2018 |
| **SURVEY_LOGO_1:USDA_logo_bw.gif** | **FORM A CORN YIELD SURVEY****SEGMENT\_\_\_\_\_\_\_\_\_ TRACT \_\_\_\_\_\_\_\_****Initial Interview****2018** | http://nassnet/miso/PRIME_Center/Communication_Guidelines/Official_Logos/NASS%20Graphic/nass_logo_bw.gif | **NATIONAL****AGRICULTURAL STATISTICS****SERVICE** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |
|  |
|  |
|  |
|  |  |  | **Date:** |   |
|  |  |  |  |  |

|  |
| --- |
| Earlier this season you gave a representative from our office information about the corn acreage on your farming operation. We are now collecting information to help determine corn production in (*Your State*) and the United StatesThe information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws. For more information on how we protect your information please visit: https://www.nass.usda.gov/confidentiality. Response is voluntary. |

|  |  |  |
| --- | --- | --- |
|  | **Starting Time (Military Time)** | 171 |
|  |  | JAS PLANTED TRACT ACRES |

|  |  |
| --- | --- |
| 1. Around June 1, the number of corn acres you had planted or intended to plant for all purposes in the field(s) in this tract was. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | 101 |
|  *Show operator his tract and fields on PHOTO. Verify the fields and* *the acreage of corn planted in the tract and entered in Table A.* |  | DO NOT CHANGE |
|  *Record the acreages of corn to be harvested for grain or seed in Column 6*  *and ADD to total*. | If no corn planted in tract, correct Table A and return all Forms. |

|  |
| --- |
| **TABLE A** |
| **FIELD****NUMBER**(Sample field number has ##) | **TOTAL****ACRES****IN FIELD** | **ACRES PLANTED****TO CORN** | **ACRES in USE or CROPS OTHER THAN CORN to be HARVESTED for GRAIN or SEED**(*For example: silage, ditches, fence rows, waterways, roads, other crops, etc.*) | **ACRES of CORN****for GRAIN or SEED**(*Col. 2 minus Col. 5*) |
| **USE** | **ACRES** |
| **1** | **2** | **3** | **4** | **5** | **6** |
|  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |
|  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |
|  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |
|  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |
|  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |
|  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |  |  | **. \_\_\_\_** |  | **. \_\_\_\_** |
|  |  |  | 105 | **. \_\_\_\_** |  |  |  |
| 2. The total corn acreage (column 6) to be harvested for grain or seed 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. |  |  |  |  |

|  |
| --- |
| According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0535-0088. The time required to complete this information collection is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. |

|  |
| --- |
| Question 2 continued |

|  |
| --- |
| a. Was corn planted in field number greater than zero? |

|  |
| --- |
| [ ]  **YES** – *Continue.* |
|  [ ]  **NO** –- *Did you list a NEW FIELD in Table A that is intended for harvest for grain or seed?* |
|  [ ]  **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.* |
|  [ ]  **NO** -  *Conclude interview, record Form A ending time, and return all forms*. |

|  |  |  |  |
| --- | --- | --- | --- |
| *All questions below apply to the SAMPLE FIELD ONLY.* |  |  |  |
| 3. Copy acres of corn for grain or seed in Sample Field Number from Table A, column 6  | **ACRES** | 103 | **. \_\_\_\_** |
|  |  |  |
| 4. What was the planter row width setting? . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | **INCHES** | 107 |
|  |  |  |
| 5. On what date was planting completed in this corn field? . . . . . . . . . . . . . . . . . . . . . . . . . . . . .  | **MM DD** | 109 |  |
|  |  |  |  |

|  |
| --- |
|  |
| 6. With your permission I will go out to the field and mark off two small plots to be used in making stalk and ear counts. I will return to the plots each month until harvest to make counts and measurements, and harvest and weigh a few ears. 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.* |
| 7. Have you or will you apply pesticides with organophosphorus content to the sample field? |
|  [ ]  **YES**  [ ]  **NO** [ ]  **DON’T KNOW**  |
|  *If YES, enter latest application date and name of pesticide .* |
| 8. Where should I leave the corn picked from the units?  |
|  (*Copy to the sample kit envelope the location where the operator wishes you to leave the corn*.) |
| 9. Do you intend to harvest this field as high moisture corn? (*High moisture corn is defined as corn with moisture content of 30 percent or more*.) |
|  [ ]  **YES**  [ ]  **NO** [ ]  **DON’T KNOW**  |

|  |
| --- |
|  |
| 10. **Respondent Name:**   | Ending Time (Military Time)  | 172 |
| **PLEASE CHECK THE FOLLOWING:*** Review for completeness
* Record ending time and sign name.
* Record operators’

 Telephone number. Harvest date. Pesticide intentions (Item 8), and Location to leave corn (Item 9) on your kit envelope. | Enumerator Number  | 190 |
| Supervisor Number  | 191 |
|  | Evaluation | 193 |
| R. Unit | 921 |
|  |  |  |
|  |
| 11. **Enumerator Name:**   | **STATUS CODE**  | 180 |