

Southern Illinois Region S.T.A.R. - Field Form - 2018 Crop Year (after harvest in 2017 through harvest of 2018)

1. Name _____ Address/City/Zip _____
 Phone (____) _____ - _____ Email _____
 2. Crop _____ 3. FSA Farm Tract # _____ Field Name _____ 4. Acres _____
 5. County _____ 6. Township & Range _____ 7. Section _____ 8. Owner _____

Instructions: Check ALL that apply or were used on this individual field.

9. Fall 2017 Cover Crops established with NRCS guidelines

- (must have some growth): *winter hardy species
 Annual Ryegrass* Crimson Clover Oats
 Tillage Radish Cereal Rye*
 Winter Wheat (even if intended for harvest)*
 Other species _____

10. Soil Sampling – use the previous 5-year history:

- Sampled every 3 years or less
 Sampled every 4 or 5 years
 GPS sampled, either by grid or zone
 Fall sampled Spring sampled Not sampled

11. Fall 2017 – February 2018 Nutrient Management:

- No Nitrogen** was applied in this time frame, other than MAP (11-52-0) or DAP (18-46-0)
 MAP or DAP was applied before December 1st AND a winter hardy cover crop was used
 Manure was applied, injected or incorporated with a stabilizer
 Manure was applied, broadcasted, and not incorporated

12. March 1, 2018 – Summer 2018 Nutrient Management:

- No Nitrogen** was applied in this time frame, other than MAP or DAP
 A post-emergence application of 25%-49% of the total Nitrogen Program
 A post-emergence application of 50% or more of the total Nitrogen Program
 Manure was applied, injected or incorporated with a stabilizer
 Manure was applied, broadcasted, and not incorporated

13. Additional Nutrient Activities:

- Nitrogen application on corn: No more than 175 pounds of actual Nitrogen was applied on first year corn (or 200 pounds on corn following corn)
 Phosphorus: At least 50% of actual phosphorus used was banded subsurface in fall or spring
 Used Triple Super (0-45-0) in fall or spring
 Used Variable Rate Technology application fall or spring
 A fertilizer source (includes manure) containing Nitrogen and/or Phosphorus was broadcast on **frozen** ground
 A fertilizer source (includes manure) containing Nitrogen and/or Phosphorus broadcast on **snow covered** ground
 Secondary/micronutrients incorporated in nutrient management plan according to soil and tissue testing

14. Crop Rotation: Mark with an "X" to indicate the crop history on THIS field for each year.

CROP	2018	2017	2016	2015	2014
Corn/Milo					
Soybeans					
Soybeans-Double Crop					
Wheat / Small Grains					
Forage (_____)					

15. Tillage Practices- starting after harvest of the 2017 crop:

- Fall: Any full width tillage operation exceeding a 3" depth
 Fall: Any full width tillage operation not exceeding a 3" depth
 Fall: No-till or Strip-till operation was used
 Spring: Any full width operation, limited to a single pass, where no fall tillage was performed
 Spring: Any full width operation, two or more passes, where no fall tillage was performed
 Spring: Any full width operation, where fall tillage was performed, one or more passes
 Spring: No-till or Strip-till performed

16. Conservation and Management Practices (must apply to this field):

- Saturated Buffers Bioreactor
 Terraces/contours Constructed wetland
 Grass Filter Strip Grass waterway
 Current HEL plan
 On-site agronomic trial (includes N-rate studies, variety trials, or tissue/plant sampling)
 Pollinator planting (a ½ acre minimum on this field)
 Attended soil or nutrient management meeting
 Have a written nutrient management program
 Enrolled in PCM, EQIP, or CSP
 Completed S.T.A.R. in 2017 crop year

17. Other Management Practices:

- Sprayed fall-applied herbicide on no-till ground
 Sprayed fall-applied herbicide over tilled ground

I understand my field may be randomly selected for verification. To the best of my knowledge, this information is correct.

Signature _____

Date _____

Save your completed form and email it to:

