

## Proforma for Post monitoring of Field Trials

Inspection date:

Name of Inspection Team:

Name of organization for field trials inspection	
Head Office:	Address: Contact No.
IBC notification date:	
IBC Chairperson:	
Name of Variety:	
Breeder (s):	
Gene (s)/Event:	
Characteristics:	
NBC approval date:	
License issue date:	
Nature of field trial	Contained <span style="float: right;">Open</span>
Containment and Risk Management	i. Nature of Physical Containment:  ii. Measures for seed collection and storage:
Location of field trial	
Date of Field trials	
Refugia and buffer zone	
Field labelling	
Climatic data	i. Weather condition  ii. Soil type  iii. Irrigation source

Fertilizers applied	
Pesticides/herbicides applied	
Current Status of Field Trials	i. Crop growth stage: ii. Crop health: iii. Insect/pest damage:
Observable phenotypic difference from non-GM crop	
Expected date of field trial completion	
Record keeping and documentation	i. Trials log book ii. Record of input usage iii. Crop Register
Expected date of Disposal of GM crop residues	
Has the applicant participated in NCVT/NUYT field trials for this variety?	Yes No.
If Yes	i. NVCT Trials locations: ii. Start date:
Field trials report submitted	1 <sup>st</sup> Year: Yes No. 2 <sup>nd</sup> Year: Yes No.
Remarks/Recommendations	

**Field Inspector**