

U-Idaho Extension | Canyon County Master Gardener Volunteer Plant Clinic

Phone Call	<input type="checkbox"/>
Walk-in	<input type="checkbox"/>
Email	<input type="checkbox"/>

Client Information Form – LAWNS AND TURFGRASS

Date: _____ Master Gardeners on Duty: _____

Client Name: _____

Address: _____

City: _____ Zip: _____

Phone Number(s): _____ Best Time to Call: _____

Email: _____

Was a sample submitted? YES NO If yes, where is it? Fridge Hallway Other _____

Was a photo submitted? YES NO If yes, where is it? _____

<p>Type of Turf Grass (if known): Describe the Problem:</p>	
<p>How long has this been going on? Are any other plants affected? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, what kinds? Have you noticed a pattern to the damage/disorder? Is the affected area near: <input type="checkbox"/> sidewalk, <input type="checkbox"/> driveway, or <input type="checkbox"/> tree roots Describe your soil: Age of lawn: Did you start with <input type="checkbox"/> seed or <input type="checkbox"/> sod? What is your average mowing height?</p>	<p>Is the affected area in <input type="checkbox"/> full sun, <input type="checkbox"/> partial sun/shade, or <input type="checkbox"/> full shade? How is your lawn watered? How often? For how long? List all insect sprays you have used anywhere: List any and all weed killers you have used anywhere: List any and all fertilizers you have used anywhere:</p>

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Our Answer or Solution:

Publication(s) given or mailed to client:

Sources Checked:	Page Numbers:
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<p>Call is Complete. Client was:</p> <ul style="list-style-type: none"><input type="checkbox"/> Given an answer by phone<input type="checkbox"/> Given an answer by voicemail<input type="checkbox"/> Given an answer in person<input type="checkbox"/> Mailed information<input type="checkbox"/> Emailed information <p><input type="checkbox"/> Sent to _____ for additional help</p> <p>Initial _____, date _____ and place in the FINISHED CALLS box.</p>	<p>Call is <i>Not</i> Complete. Client was:</p> <p><input type="checkbox"/> Called or <input type="checkbox"/> emailed for more information:</p> <table border="1" style="width: 100%;"><thead><tr><th>Date</th><th>Left Message</th><th>No Answer</th><th>MG on Duty</th></tr></thead><tbody><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table> <p>Do not try more than three times to reach a client. If you've tried with no luck, check here <input type="checkbox"/></p> <p>Then initial _____, date _____ and place in FINISHED CALLS box.</p>	Date	Left Message	No Answer	MG on Duty												
Date	Left Message	No Answer	MG on Duty														

Call is *Not* Complete. I'm waiting for an answer from someone else:

Sample Photos were sent to _____ on _____
Person or Facility Date

Answer received:

Answer was communicated to client by phone, by message, in person, by mail, by email

Call is Complete. Initial _____, date _____ and place in **FINISHED CALLS** box.