

## FIELD OPERATIONS RECORD (English)

Farmer name: \_\_\_\_\_ RCM reference number: \_\_\_\_\_  
 Farm lot name: \_\_\_\_\_ RCM farm lot ID: \_\_\_\_\_  
 Farm lot size (ha): \_\_\_\_\_ Variety type (*inbred or hybrid*): \_\_\_\_\_  
 Cropping season & year (*wet or dry season*): \_\_\_\_\_ Variety name: \_\_\_\_\_  
 Crop establishment method:

(*Select: manual transplanted, mechanical transplanted, wet seeded, or dry seeded*): \_\_\_\_\_

**If transplanted:**

Sowing date in seedbed: \_\_\_\_\_  
 Transplanting date: \_\_\_\_\_

**If wet or dry seeded:**

Sowing date in field: \_\_\_\_\_  
 Seed rate (kg): \_\_\_\_\_

**Fertilizer application:**

**A. Seedbed, if transplanted**

Sequence of application	Days after sowing	Name of fertilizer*	Type of fertilizer (organic, inorganic, or foliar)	Amount or quantity	Units used (kg, liter, or bag)
First					
Second					
Third					

\*Name of fertilizer can be 14-14-14, 14-14-14 with S, 16-20-0, urea (46-0-0), 21-0-0, zinc sulfate, zinc oxide, foliar fertilizer, or other source with or without analysis listed on the bag

**B. Main field**

Sequence of application	Days after transplanting or sowing in field	Name of fertilizer*	Type of fertilizer (organic, inorganic, or foliar)	Amount or quantity	Units used (kg, liter, or bag)
First					
Second					
Third					
Fourth					
Fifth					
Sixth					
Seventh					
Eighth					

\*Name of fertilizer can be 14-14-14, 14-14-14 with S, 16-20-0, urea (46-0-0), MOP (0-0-60), 21-0-0, zinc sulfate, zinc oxide, foliar fertilizer, or other source with or without analysis listed on the bag

**Insecticide, molluscicide, bactericide, and fungicide application:**

Sequence of application	Days after transplanting or sowing in field	Name of product	Type of pesticide (insecticide, molluscicide, bactericide, fungicide)
First			
Second			
Third			
Fourth			
Fifth			
Sixth			
Seventh			
Eighth			

## FIELD OPERATIONS RECORD (English)

### Herbicide application:

Type of herbicide	Days of application after transplanting or sowing in field	Name of product
Pre-emergence		
Post-emergence		

### Hand weeding schedule:

Sequence	Days after transplanting or sowing in field	Sequence	Days after transplanting or sowing in field
First		Third	
Second		Fourth	

**Date of harvest:** \_\_\_\_\_

Total fresh harvest of unmilled rice after threshing (including shares for others):

Number of bags: \_\_\_\_\_ Weight of each bag (kg/bag): \_\_\_\_\_

### Put a check on the constraint/s that caused an adverse effect on yield:

- |   |  |                                  |   |
|---|--|----------------------------------|---|
| <input checked="" type="checkbox"/> No constraint | <input type="checkbox"/> Insect pest             | <input type="checkbox"/> Disease | <input type="checkbox"/> Rat damage           |
| <input type="checkbox"/> Drought                  | <input type="checkbox"/> Heavy rains at maturity | <input type="checkbox"/> Lodging | <input type="checkbox"/> Shattering of grains |

#### Specify the major pest encountered

Insect pest: \_\_\_\_\_

Disease: \_\_\_\_\_

Vertebrate pest (rat or bird): \_\_\_\_\_

#### Rice crop stage it occurred

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_