**Application Form for the Year 2024
Proficiency Testing Programmes**

**MPZ UKZUZ**

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| **Abbreviation** | **Programme** | **Period 1** | **Period 2** | **Double****amount** |
| P | Analysis of Soils |  |  |  |
| L | Analysis of Sludge and Sediments |  |  |  |
| R | Analysis of Plants |  |  |  |
| K | Analysis of Feedstuffs |  |  |  |
| RT | Analysis of Oil Plant Seeds |  |  |  |
| DLV | Analysis of Vitamins in Feedstuffs |  |  |  |
| DLK | Analysis of Coccidiostats in Feedstuffs |  |  |  |
| MTX | Analysis of Mycotoxins |  |  |  |
| HN | Analysis of Fertilizers |  |  |  |
| \*PT-PAS | Pesticides in Agricultural Soil |  |  |  |

**\*** labeled programmes are not included to the scope of accreditation by ČIA according to EN ISO/IEC17043:2010

**Contacts**

Name of laboratory :

Department:

Street:

Postal code:

City:

Country:

Company registration number:

VAT identification number:

Contact person:

E-mail:

Telephone:

**Invoice address:** *(if it is different from the address of laboratory)*

Company:

Street:

Postal code:

City:

Country:

Date: Signature:

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