



COOPERATIVE EXTENSION
College of Agriculture, Forestry and Life Sciences

Sushi Rice Testing Request Form

Contact Information

Name: _____ Company: _____
E-mail: _____ Phone: _____

Street Address: _____
City: _____ State: _____ Zip: _____

Product Information

A separate form must be completed for each product submitted. Do not combine forms for multiple products.

Name of Product: _____ Type of Product: _____
(i.e., acidified rice)

Package Description: _____
(i.e., Tupperware, pouch, plastic bottle, etc.)

Describe processing and packaging method (i.e., ingredients, method of preparing, storage):

Whom do you plan on selling the product to?

Recipe Specifications

Recipe information must be submitted for all testing procedures. Failure to submit this page of the form will delay testing. Recipes are kept confidential per Clemson University policy.

To ensure accuracy please include the brand name of each ingredient if applicable. In the “additional information” column include any additional information about the ingredient that would help describe the ingredient (i.e., canned, fresh, no added salt, gluten free, from concentrate, etc.). All weights and measures must be accurate. Failure to provide accurate weights and measures will delay testing. Do not give numbers of items (i.e., 3 peppers) without a weight or measure; instead provide the total weight or measure of the items (i.e., ½ pound green bell peppers).

Product Recipe		
Name of Ingredient:	Amount (unit): (i.e., 3 cups, 6 Tablespoons, 250 grams, etc.)	Additional Information

Recipe Yields

1. Recipe makes a total of: _____
(Designate as cups, ounces, milliliters, pounds, grams, etc.)
2. Serving size: _____
(cups, ounces, etc.) → How much of your product do you consider one serving

Product Testing Process and Instructions

The cost for sushi rice pH testing is \$100.

Broken, leaking, or improperly sealed and marked samples will not be tested.

No substitutions for this form will be accepted. This form must be completed in its entirety and submitted with product samples and payment. Failure to submit this completed form will delay product testing results.

Mail this completed product testing form along with one sample from four different batches (4 samples total per product) and check made payable to “Clemson University” to:

Clemson University
c/o Dr. Julie Northcutt; Product Testing
Laboratory Department of Food, Nutrition, and
Packaging Science 223 Poole Agricultural Center
Clemson, SC 29634-0316

*Note: UPS and Post Office sometimes question this address. Please tell them to send the package to the address above exactly as listed. It will get to the correct location by using this address. **Do not use Federal Express to ship samples.**

*Packages must include Dr. Julie Northcutt’s name as listed above. If not included, we cannot ensure that samples will be tested in a timely manner.

** For credit card purchases please see our website [Food2Market](https://www.food2market.com) for details. There is a 3% convenience fee for this service. **

Products must be mailed to the address listed above. **Absolutely no in-person deliveries of product samples will be accepted.**

Please mark on the outside of the package “**keep refrigerated**”. Email Adair Hoover, cpope@clermson.edu, to notify of a refrigerated package coming.

For questions about the product testing process please contact Kimberly Baker at kabaker@clermson.edu or Adair Hoover at cpope@clermson.edu or 864-986-4313. **Do not** call Clemson University’s Department of Food, Nutrition and Packaging Science. This office is unable to answer any questions regarding product testing.

Cash cannot be accepted for payment of product testing. Only checks made payable to “Clemson University” can be accepted at this time.

Please allow a minimum of four (4) weeks for testing results to be returned.

Please keep in mind that Clemson University is an educational institution, and all faculty, staff and employees have responsibilities in addition to the product testing lab.

Please note that products cannot be accepted when the product testing laboratory is closed. Make sure that samples are not scheduled to be delivered on holidays, weekends or on the following dates:

- October 14-16, 2024
- November 25, 2024 -January 6, 2025 (Note that samples received on or after November 25 will not be tested until the lab re-opens in January)
- March 17-21, 2025

The product testing laboratory is not responsible for lost, spoiled or broken samples.

FOR LAB USE ONLY (ANALYST TO COMPLETE AND FILE IN PRODUCT TESTING FOLDER)

Sample Receiving		
Date Received:	Date Tested:	Check Number:

Product Testing Data		
Sample	pH 1	pH 2
1		
2		
3		
4		