



CAES

The Connecticut Agricultural Experiment Station

Putting Science to Work for Society since 1875

123 Huntington Street

New Haven, CT 06511

203.974.8500

Toll free: 1.877.855.2237

Fax: 203.974.8502

Email: caes@ct.gov • portal.ct.gov/caes

Tick Submission Form

Date: _____

Instructions: Complete this form and include it with your tick specimen
(It is important to print information legibly).

Information on person/health department submitting tick (to whom report will be sent):
(Please identify name and e-mail address of the person/health department official to whom the report will be sent).

Name: Monroe Health Department

Address: 7 Fan Hill Road

City: Monroe State: CT Zip Code: 06468

Email address (required): health@monroect.gov ; lshaw@monroect.gov Telephone number: 203-452-2818

Submitter Email: _____

Please note that the Tick Testing Program is intended for the identification and/or testing of ticks which have fed on humans. Ticks removed from pets will be identified, but not tested.

Was this tick removed from a pet? Y ☐ N ☐

Pet species/name/age: _____

Information on person bitten by tick:

Name (if different from above): _____

Address (if different from above): _____

Telephone number(s): _____

Age: _____ Gender: M ☐ F ☐

Date tick was removed: _____ Part of body where tick was found: _____

Town in which tick was acquired: _____

Please submit samples to:

**The Connecticut Agricultural Experiment Station, Tick-Testing Laboratory, 123 Huntington Street,
P.O. Box 1106, New Haven, CT 06504**

Phone: (203) 974-8500

Fax: (203) 974-8502

Toll Free: 1-(877) 855-2237

<https://portal.ct.gov/CAES/>

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