



SECCHI DISK TRANSPARENCY 2019 Data Form



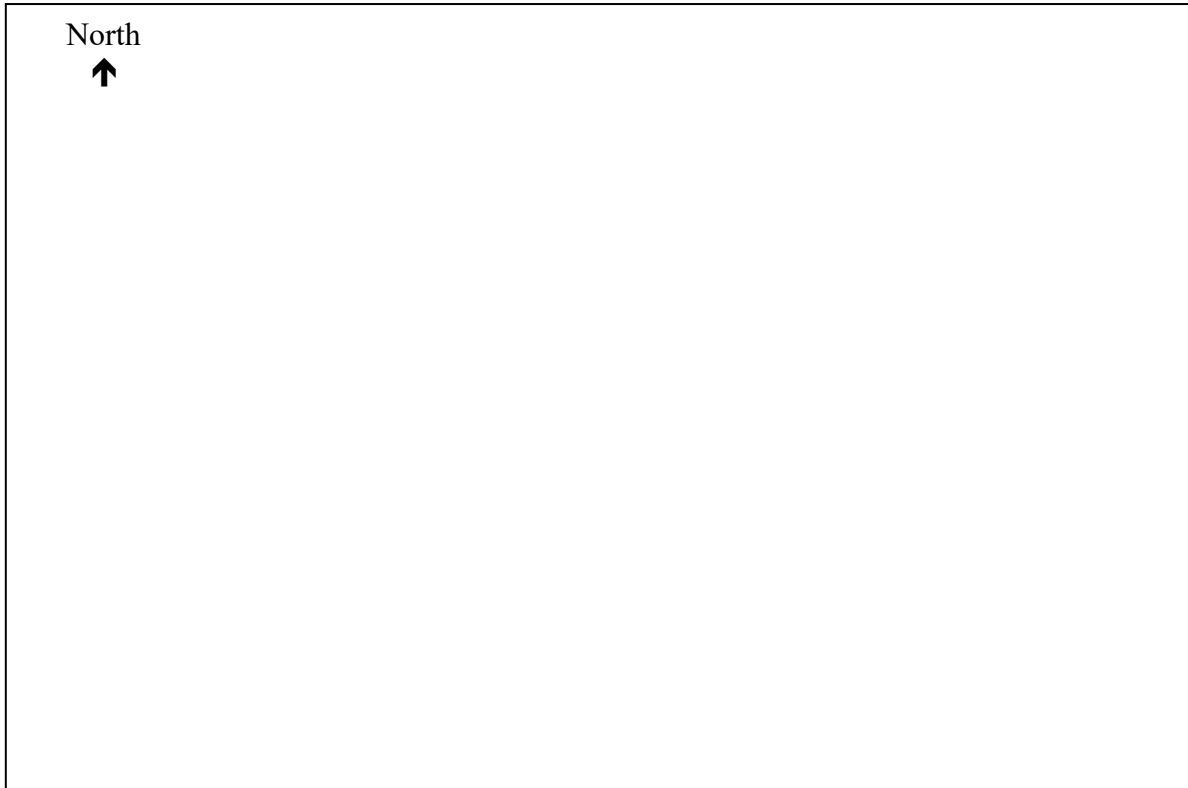
Lake Name: _____ County: _____ Township: _____
 Lake Sampling Site (Field ID) Number: _____ (see reverse and mark location on map)
 Latitude: _____ Longitude: _____
 Volunteer Monitor Name(s): _____

WEEKLY SAMPLING INTERVAL	DATE SAMPLED	TIME OF DAY	SECCHI DEPTH (to nearest ½ foot)	WEATHER CONDITIONS (sunny, cloudy, windy)	UNUSUAL CONDITIONS (secchi disk is on bottom of lake, heavy rain, boating, etc.)
May 12-18					
May 19-25					
May 26-June 1					
June 2-8					
June 9-15					
June 16-22					
June 23- 29					
June 30- July 6					
July 7-13					
July 14-20					
July 21-27					
July 28- Aug 3					
Aug 4-10					
Aug 11-17					
Aug 18-24					
Aug 25-31					
Sept 1-7					
Sept 8-14					
Sept 15-21					

Please note that acceptable dates are from the week including May 15 through the week including September 15. Other measurements will not be used in the annual report.

- ❖ In the box below draw an outline of your lake (i.e lake map)
- ❖ On the lake map outline, mark your Secchi disk sampling location (this should be at the deepest basin in the lake) and write in the total LAKE DEPTH at this location.
- ❖ Surface Area of Lake (if known): _____ (acres)

North
↑



DATA ENTRY

Check **ONE** box:

A volunteer has entered the field notes into the MiCorps Data Exchange (before October 30!)
Volunteer Name _____ Date entered _____.

The field notes **have not** been entered into the MiCorps Data Exchange.

DATA SHEET TURN IN

No matter what box you check above, please do the following:

Make a copy for your records, and mail data form by October 30 to:

MLSA, P.O. Box 303, Long Lake, MI 48743