



SECCHI DISK TRANSPARENCY 2018 Data Form



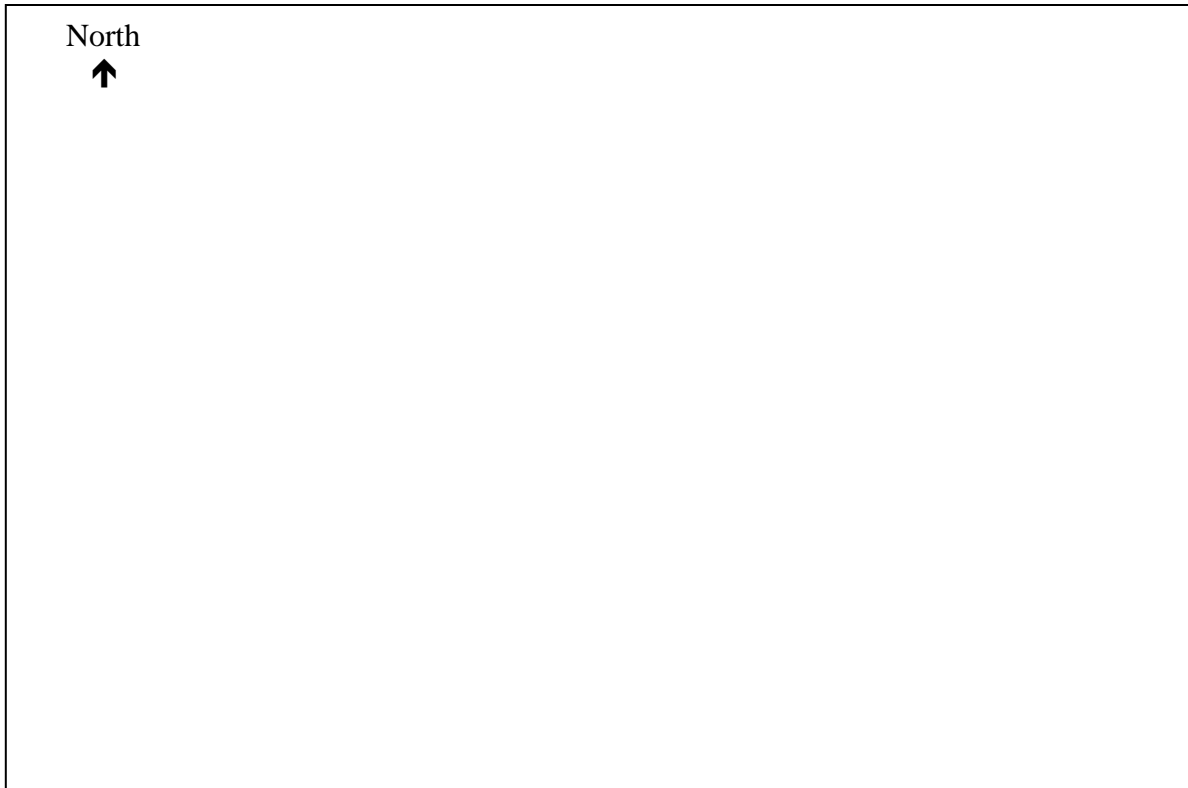
Lake Name: _____ County: _____ Township: _____
 Lake Sampling Site (Field ID) Number: _____ (see reverse and mark location on map)
 Latitude: _____ Longitude: _____
 Volunteer Monitor Name(s): _____

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 13-19					
May 20-26					
May 27-June 2					
June 3-9					
June 10-16					
June 17-23					
June 24- 30					
July 1- July 7					
July 8-14					
July 15-21					
July 22-28					
July 29- Aug 4					
Aug 5-11					
Aug 12-18					
Aug 19-25					
Aug 26-Sept 1					
Sept 2-8					
Sept 9-15					

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