



SECCHI DISK TRANSPARENCY 2021 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 <small>(to nearest ½ foot)</small>	WEATHER CONDITIONS <small>(sunny, cloudy, windy)</small>	UNUSUAL CONDITIONS <small>(Secchi disk on bottom of lake, heavy rain, boating, etc.)</small>
May 9-15					
May 16-22					
May 23-May 29					
May 30-June 5					
June 6-12					
June 13-19					
June 20-26					
June 27-July 3					
July 4-10					
July 11-17					
July 18-24					
July 25-31					
Aug 1-7					
Aug 8-14					
Aug 15-21					
Aug 22-28					
Aug 29-Sept 4					
Sept 5-11					
Sept 12-18					

- ❖ In the box below draw an outline of your lake (i.e. lake map). Or attach a copy of a lake map.
- ❖ On the lake map, mark your Secchi disk sampling location (this should be at the deepest location in your lake) and write the LAKE DEPTH at this location (not Secchi depth).
- ❖ Surface Area of Lake (if known): _____(acres)

North
↑



DATA ENTRY

If you can, please enter your data into the MiCorps Data Exchange by October 31st.

DATA SHEET TURN IN Protocol

Please do the following:

- (1) Make a copy of your field data sheets to keep for your records,
- (2) Mail one copy by October 31st to: **MLSA, P.O. Box 303, Long Lake, MI 48743**