



SECCHI DISK TRANSPARENCY 2022 Data Form



Lake Name: _____ County: _____ Township: _____

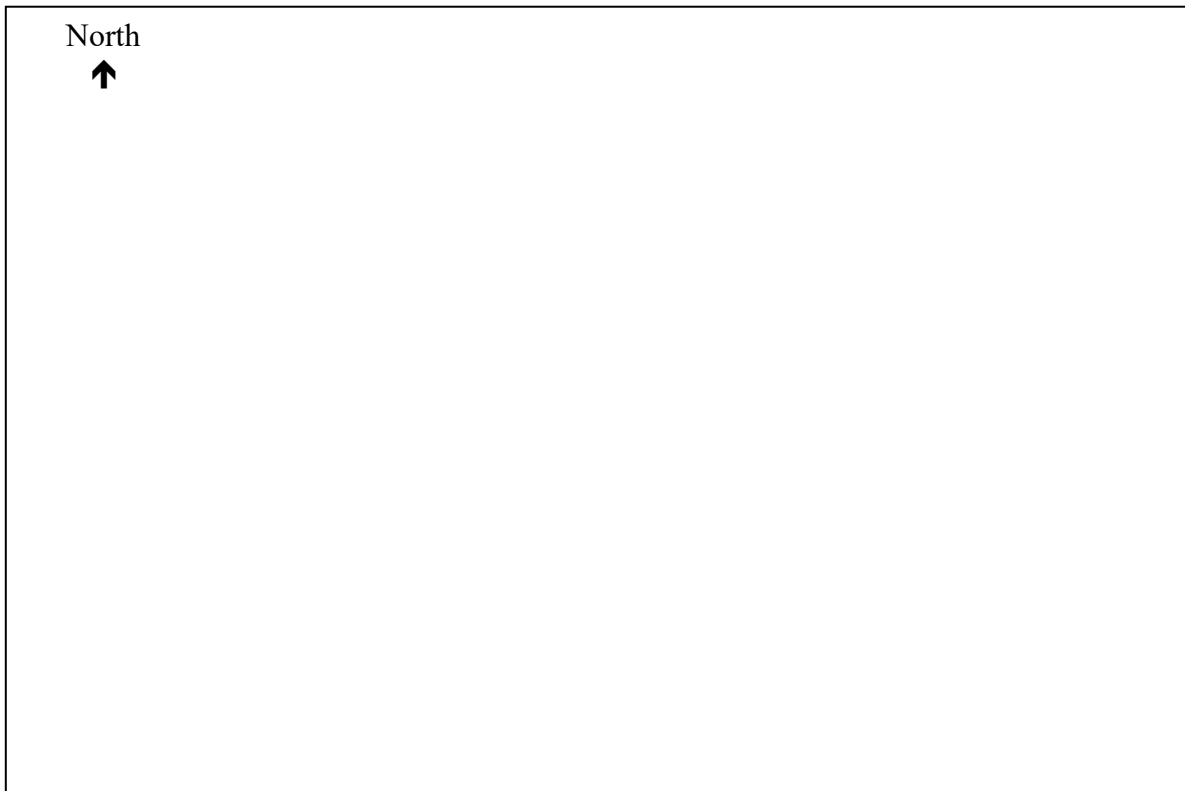
Lake Sampling Site (Field ID) Number: _____ (see reverse and mark location on map)

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 15-21					
May 22-28					
May 29-June 4					
June 5-11					
June 12-18					
June 19-25					
June 26-July 2					
July 3-9					
July 10-16					
July 17-23					
July 24-30					
July 31-Aug 6					
Aug 7-13					
Aug 14-20					
Aug 21-27					
Aug 28-Sept 3					
Sept 4-10					
Sept 11-17					

- ❖ 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
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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**
 - a. For electronic submission, send to: MiCorps@msu.edu