



SECCHI DISK TRANSPARENCY 2023 Data Form



Lake Name: _____ County: _____ Township: _____

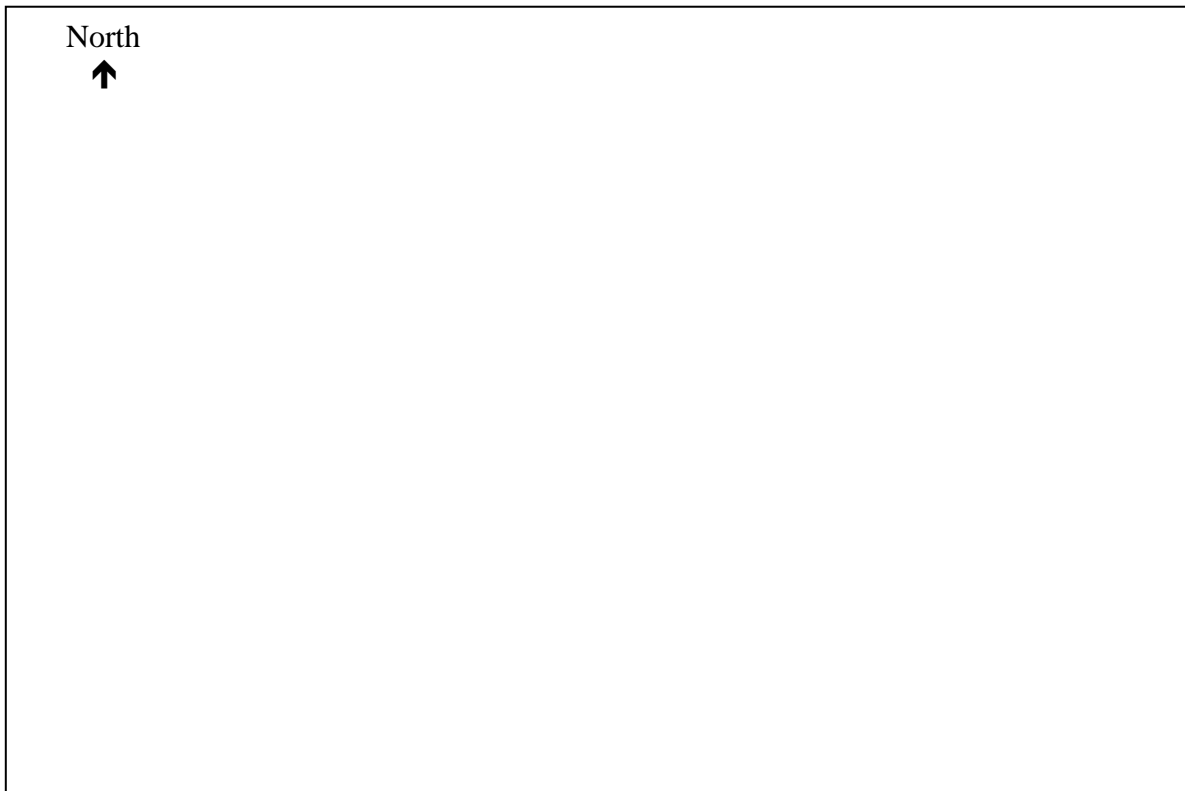
Lake Sampling Site (Field ID) Number: _____ (see reverse and mark location on map)

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 14-20					
May 21-27					
May 28-June 3					
June 4-10					
June 11-17					
June 18-24					
June 25-July 1					
July 2-8					
July 9-15					
July 16-22					
July 23-29					
July 30-Aug 5					
Aug 6-12					
Aug 13-19					
Aug 20-26					
Aug 27-Sept 2					
Sept 3-9					
Sept 10-16					

- ❖ 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. OR, for electronic submission, send to: MiCorps@msu.edu