



# Connecticut Lake Watch

## FIELD DATA SHEET

### Volunteer Information

Field Lead Name:	Phone:
Organization:	
Additional Volunteers:	

### Site Information

Waterbody:	Site ID:	
Town	Latitude:	Longitude:

### Visit Details

Date:	Time:	Cloud Cover: <input type="checkbox"/> 0-5% <input type="checkbox"/> 6-24% <input type="checkbox"/> 25-49% <input type="checkbox"/> 50-69% <input type="checkbox"/> 70-89% <input type="checkbox"/> 90-100%
Light Conditions: <input type="checkbox"/> Bright <input type="checkbox"/> Cloudy-bright <input type="checkbox"/> Overcast	Precipitation: <input type="checkbox"/> None <input type="checkbox"/> Rain <input type="checkbox"/> Snow	
Wind Conditions: <input type="checkbox"/> Calm <input type="checkbox"/> Light <input type="checkbox"/> Light to Breezy <input type="checkbox"/> Breezy <input type="checkbox"/> Windy <input type="checkbox"/> Very Windy <input type="checkbox"/> Strong		
Water Surface Conditions: <input type="checkbox"/> Completely calm <input type="checkbox"/> Small waves, frequent whitecaps <input type="checkbox"/> Smooth or rippled to small wavelets <input type="checkbox"/> Moderate crested waves, many whitecaps <input type="checkbox"/> Large wavelets, crests begin to break, few whitecaps <input type="checkbox"/> Large waves, white crests everywhere, spray		

### Monitoring Data

Air Temp.: _____ <input type="checkbox"/> C <input type="checkbox"/> F	Surface Water Temp.: _____ <input type="checkbox"/> C <input type="checkbox"/> F <input type="checkbox"/> Thermometer <input type="checkbox"/> Probe		
Sampling Platform: <input type="checkbox"/> Boat/Canoe <input type="checkbox"/> Dock/Pier <input type="checkbox"/> Bridge <input type="checkbox"/> Shore (Wading) <input type="checkbox"/> Other	Shady side of boat? <input type="checkbox"/> Yes <input type="checkbox"/> No	Water Depth: <input type="checkbox"/> m <input type="checkbox"/> ft _____	
Secchi Disk Depth Reading #1: _____ <input type="checkbox"/> m <input type="checkbox"/> ft	On Bottom? <input type="checkbox"/> Yes <input type="checkbox"/> No	View Tube Used? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Secchi Disk Depth Reading #2: _____ <input type="checkbox"/> m <input type="checkbox"/> ft	On Bottom? <input type="checkbox"/> Yes <input type="checkbox"/> No	View Tube Used? <input type="checkbox"/> Yes <input type="checkbox"/> No	

### Field Notes / Comments

Please submit these data to CT DEEP using the [www.lakeobserver.org](http://www.lakeobserver.org) web app and keep this form for your records.

