



Name: \_\_\_\_\_ Date: \_\_\_\_\_

### Activity 3: Data Collection Student Worksheet

Name of river, stream, etc.: \_\_\_\_\_

City: \_\_\_\_\_ Latitude: \_\_\_\_\_  
(e.g. 75° N)

Time: \_\_\_\_\_ Longitude: \_\_\_\_\_  
(e.g. 18° W)

Wind Direction: N – NE – E – SE – S – SW – W – NW Altitude: \_\_\_\_\_  
(circle one) (Approximate)

Current weather: CLEAR – PARTLY CLOUDY – FOG – OVERCAST – RAIN  
(circle one)

Recent weather conditions: \_\_\_\_\_  
(e.g. day after a big rain storm, etc.)

Surface Conditions: CALM – LIGHT CHOP – HEAVY CHOP – SWELLS  
(circle one)

Adjacent Shoreline Descriptions: \_\_\_\_\_  
(e.g. residential development, marina, wetland, etc.)

Condition of the river, stream, lake or pond (i.e. Does it appear to be polluted with any debris or matter? Are there any fish or plants in the water? Is there a lot of algae growing in it?, etc.): \_\_\_\_\_

Color and odor of the water: \_\_\_\_\_

Clarity or amount of suspended material in the water: \_\_\_\_\_  
(e.g. Is the water clear, cloudy, or muddy? Can you see many suspended particles floating in the water?, etc.)

Wildlife observations: \_\_\_\_\_  
(e.g. Is the herd of deer nearby? Can you see any other animals or reptiles ?, etc.)

Other observations that you think are interesting or significant: \_\_\_\_\_

## Required Water Sampling Tests

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**Water Temperature:** \_\_\_\_\_ °C

**Dissolved Oxygen (DO):** \_\_\_\_\_ ppm

**pH:** \_\_\_\_\_

### Macroinvertebrates:

SENSITIVE	SOMEWHAT	TOLERANT
<input type="checkbox"/> ___ Mayfly larvae	<input type="checkbox"/> ___ Alderfly larvae	<input type="checkbox"/> ___ Midge fly larvae
<input type="checkbox"/> ___ Stonefly larvae	<input type="checkbox"/> ___ Crane fly larvae	<input type="checkbox"/> ___ Black fly larvae
<input type="checkbox"/> ___ Caddisfly larvae	<input type="checkbox"/> ___ Fishfly larvae	<input type="checkbox"/> ___ Chironomid larvae
<input type="checkbox"/> ___ Dobsonfly ( <i>hellgrammite</i> )	<input type="checkbox"/> ___ Watersnipe fly larvae	<input type="checkbox"/> ___ Aquatic worms
<input type="checkbox"/> ___ Riffle Beetle (adult)	<input type="checkbox"/> ___ Damselfly larvae	<input type="checkbox"/> ___ Lung snails
<input type="checkbox"/> ___ Water Penny larvae	<input type="checkbox"/> ___ Dragonfly larvae	<input type="checkbox"/> ___ Leeches
<input type="checkbox"/> ___ Planaria ( <i>flatworm</i> )	<input type="checkbox"/> ___ Riffle Beetle larvae	
<input type="checkbox"/> ___ Gilled snail	<input type="checkbox"/> ___ Whirligig Beetle larvae	
	<input type="checkbox"/> ___ Clam or Mussel	
	<input type="checkbox"/> ___ Crayfish	
	<input type="checkbox"/> ___ Scuds	
	<input type="checkbox"/> ___ Sowbug	

## Optional Water Sampling Tests

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**Nitrates:** \_\_\_\_\_ ppm

**Phosphates:** \_\_\_\_\_ ppm

**Biological Oxygen Demand (BOD):** \_\_\_\_\_ ppm

**Turbidity** \_\_\_\_\_

**Coliform Bacteria:** \_\_\_\_\_