Chesapeake Water Watch

	Latitude and Longitude Time Collected			Sample Name EX: initials of body of water_unique name_your initials Name of Person Collecting		
!!!MOST IMPORTANT!!! GPS Location & Suggested Name for Sample Location						
What was the percent cloud cover when collecting? (Circle one)	Clear 0-5%	Mostly Clear 25%	Partly Cloudy 50%	Mostly Cloudy 75%	Cloudy 90-100%	
What was the wind like? (Circle one)	Calm	Light to Breezy	Breezy	Windy	Strong Winds	
How were the waves? (Circle one)	Completely Calm	Ripples to small wavelets	Few whitecaps	Frequent whitecaps	Many whitecaps	
What was the air temperature?						
Did you notice submerged aquatic vegetation (SAV), also known as "seaweed" growing in the surrounding area?	Yes	No				

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Instrument Id:	
(Lab Use Only)	

Date:

Time Analyzed:

Name of Person Analyzing:_____

	BLANK	1	2	3	
HydroColor Readings (Optional)					
Aquafluor In Vivo Chlorophyll Reading (Lab Use Only)					
Aquafluor CDOM Reading (Lab Use Only)					
Turbidity Reading (Lab Use Only)					
Sechhi Disk Readings (Optional)					
Notes (Was there anything about your collection site that could have affected the sample? An example would be if you sampled near a busy boat ramp)					