

Personally identifiable information collected on this form will be incorporated into the DNR aquatic invasive species database. It is not intended to be used for any other purposes, but may be made available to requesters under Wisconsin's Open Records laws, s. 19.32 - 19.39, Wis. Stats.

Primary Data Collector			
Name		Phone Number	Email
Monitoring Location			
Waterbody Name		Township Name	County
Date and Time of Monitoring			
Start Date	Start Time	End Date (= Start Date)	End Time
Monitoring Results			
Method used: <input type="checkbox"/> 100 meter tows <input type="checkbox"/> Boated for 120 seconds at 3 km/hr			
Diameter of zooplankton net opening mm/inches (circle one)		Number of tows at each site: <input type="checkbox"/> 1 <input type="checkbox"/> 2	
During this monitoring trip, did you find what you suspect are Spiny Water Fleas in this waterbody?			<input type="checkbox"/> Yes <input type="checkbox"/> No
During this monitoring trip, did you find what you suspect are Fishhook Water Fleas in this waterbody?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Voucher Sample			
If you found Spiny or Fishhook Water fleas, did you collect a voucher specimen and bring it to your local DNR office? If so, which office?			
<input type="checkbox"/> Rhinelander	<input type="checkbox"/> Spooner	<input type="checkbox"/> Green Bay	<input type="checkbox"/> Oshkosh <input type="checkbox"/> Did not take sample to a DNR office
<input type="checkbox"/> Fitchburg	<input type="checkbox"/> Waukesha	<input type="checkbox"/> Eau Claire	<input type="checkbox"/> Superior <input type="checkbox"/> Other Office: _____

If you find Spiny or Fishhook Water Fleas

Please bring a copy of this form, along with a voucher specimen and if possible, a map showing where you found the suspect waterfleas to your regional Citizen Lake Monitoring Coordinator at the DNR.

If you don't Find Spiny or Fishhook Water Fleas

If you submit your data online, that is all you need to do. Otherwise, please mail a copy to your regional DNR Citizen Lake Monitoring coordinator.

For DNR staff to fill out			
Name of person or herbarium who identified the voucher specimen			
Was the specimen confirmed as....?			
Spiny Waterflea?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Fishhook Waterflea?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If no, what was it?
Have you entered the results of the voucher in SWIMS?			<input type="checkbox"/> Yes <input type="checkbox"/> No
DNR staff: Please enter voucher information into SWIMS under the AIS Voucher project for your region. Enter date of sampling for "Start Date", Person who identified specimen as "Data Collector", and Monitoring location as "Station".			