

Volunteer Stream Monitoring - Urban Road Salt Study

IOWA MONITORING DATA SHEET

Station ID Number: _____ (Please use one data sheet for each station.)

Station Name: _____

Team Members: _____

Please enter your site's monitoring data into Google Drive each month.

Monitoring date: (include year)					
Start time and End time:	-	-	-	-	-
Comments: (Streamside observations and past weather.) <i>Please use back for additional comments.</i>					
Primary sampling, Triggered event, or Other (P/T/O)					
Ice covered? (Circle Yes or No)	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Conductivity meter calibrated? (Circle Yes or No)	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Air temperature	°C	°C	°C	°C	°C
H₂O temperature	°C	°C	°C	°C	°C
Conductivity (Circle units – μS/cm or mS/cm for each entry)	μS/cm or mS/cm	μS/cm or mS/cm	μS/cm or mS/cm	μS/cm or mS/cm	μS/cm or mS/cm
Sulfate	mg/L	mg/L	mg/L	mg/L	mg/L
Hardness	mg/L	mg/L	mg/L	mg/L	mg/L
pH					
Chloride (field test kit)	mg/L	mg/L	mg/L	mg/L	mg/L
Chloride grab sample taken? (Circle Yes or No)	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
Current weather (sunny, partly sunny, cloudy, rain, snow, thunderstorm)					
Water level (high, low, normal)					
Initials of person entering data and Date data were entered into Google Drive:					

At least once per year, please review your data sheets to be sure they are fully completed, and return them to project coordinators for QA/QC checks.