

Green Bay Volunteer Aesthetics Monitoring Data Sheet

**Please answer all questions on the datasheet completely and to the best of your ability.
DNR cannot use incomplete data sheets in station data analysis.**

If you have questions or to return this survey, please contact <insert contractor's name and contact info>

1. Your name:					Form revision date: 01/06/15	Overall aesthetic impression of site
3. Monitoring date:	m m / d d / yy		4. Start time (include AM/PM):			
5. Water conditions:	Calm	Slight movement	Moderate flow or waves	Rough or fast flowing		
6. Water level:	High		Normal	Low		
7. Overall, how aesthetically pleasing do you find the site?						
Circle <u>one</u> of the following: Please describe. List any factors that make it pleasing or not pleasing.	Very pleasing	Somewhat pleasing	Neither pleasing nor displeasing		Somewhat displeasing	Very displeasing
8a. Is the color or clarity of the water unattractive?	Yes			No		
If yes, please describe:						
8b. If yes to 8a, does the unattractive water color or clarity prevent you from accessing, enjoying, or using the water?	Yes			No		
9. For water color and clarity, please circle the answer choice that best describes the present appearance. For water surface, please circle any applicable attributes.						
A. Water Color:	Colorless	Red	Green	Brown	Other (please indicate) _____	
B. Water Clarity:	Completely clear	Fairly clear	Fairly cloudy	Completely cloudy		
C. Water Surface: (Circle all that apply)	Normal	Oily sheen	Foamy	Floating aquatic plants		
	Natural debris	Neon green sheen		Other (please indicate) _____		
10a. Is there floating or submerged garbage present in the water?						
If yes, circle visible item(s):	Yes			No		
	Building materials	Medical items	Household waste	Sewage-related litter		
	Food-related litter	Fishing-related litter		Other (please indicate) _____		
10b. If yes to 10a, does the garbage in the water prevent you from accessing, enjoying, or using the water?						
	Yes			No		
11a. Are any other substances present in the water that are not specifically mentioned on this form?						
If yes, list type(s) and reason(s):	Yes			No		
11b. If yes to 11a, do these other substances in the water prevent you from accessing, enjoying, or using the water?						
	Yes			No		

Objectionable deposits in/characteristics of the water

12a. Is there garbage along the shoreline?

If yes, circle type(s):	Yes		No	
	Building materials	Medical items	Household waste	Sewage-related litter
	Food-related litter	Fishing-related litter	Other (please indicate) _____	

12b. If yes to 12a, does the shoreline garbage prevent you from accessing, enjoying, or using the water?

	Yes	No
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13a. Along the shoreline, are there problem animals or problems caused by animals?

If yes, list type(s) and reason for problem(s):	Yes	No

13b. If yes to 13a, do these animal-related problems prevent you from accessing, enjoying, or using the water?

	Yes	No
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14a. Is there nuisance vegetation along the shoreline?

If yes, list type and amount:	Yes	No

14b. If yes to 14a, does this nuisance vegetation prevent you from accessing, enjoying, or using the water?

	Yes	No
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15a. Are there any other shoreline substances that are not specifically mentioned on this form ?

If yes, list type(s):	Yes	No

15b. Do these other shoreline substances prevent you from accessing, enjoying, or using the water?

	Yes	No
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16. Have you previously evaluated this station?

If you have previously evaluated this station, what changes if any have you noticed in the aesthetic quality of the water or along the shoreline since your last visit?	Yes	No

Comments: Please include anything else you thought should be reported while completing this survey.

17. END TIME:**For volunteer coordinator/DNR use only**

Date the data sheet was reviewed by <contractor>:		Data entered into SWIMS? <input type="checkbox"/>
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Aesthetic impression score (for DNR use only):	
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Assessment score (for DNR use only):	
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Objectionable deposits on the shoreline

Additional feedback

QA/QC