

Record sheets

This section includes the record sheets you will need to record your data. Make sufficient copies of each. The forms are:

- Equipment maintenance and calibration record
- Preparing your equipment for sampling
- Water quality results

Waterwatch equipment maintenance and calibration record

Make sufficient copies of this page for all equipment items used by your group. You can record data for equipment requiring one-point or two-point calibration in the table.

Test equipment name: _____

Identification number: _____

Inspection frequency: _____

Type of inspection: _____

Calibration standards used and expiry date: _____

Calibration frequency: _____

Expiry date of reagents (if applicable): _____

Use the table below to record the results of calibration checks.

Date	Expected value	Measured value	Expected value	Measured value	Comments

Preparing your equipment for sampling

Use this checklist to ensure that all equipment and reagents used for sample collection and analysis are working correctly before going into the field. Tick (i.e. ✓) the equipment you need to take on your visit to the test site. Put another line through it (making a cross) when you are packing up to return (i.e. ✗).

Date			
Collate documents and equipment for recording data			
<i>Waterwatch</i> Technical Reference Manual			
<i>Waterwatch</i> Field Handbook			
Data Result Sheets			
Sticky labels			
Pens, pencils, note paper, eraser			
Marker pen (waterproof)			
Camera and film			
Prepare water testing equipment for use			
Clean sample bottles (sterilise bacteria sample bottles)			
Check batteries in meters, replace if necessary			
Check condition of meters and probes – no dirt, salt or algae, etc			
Dissolved oxygen meter – fill probe			
Calibration standards and reagents still useable – within expiry date, no unexpected colour change, unusual smells or precipitation on the bottom			
Last calibration performed is acceptable			
Calibrate meters – details recorded and acceptable			
Correct reagents and quantities present in kits			
Pack test equipment for parameters to be measured			
Macro-invertebrates			
Algae			
Velocity			
Flow			
Temperature			
Turbidity			
Conductivity			
pH			
Dissolved oxygen			
Phosphate			
Nitrate			

Collate sampling equipment			
Sample bottles			
Sampling pole and bottle holder			
Buckets			
Liquid chemical waste bottle			
Toxic chemical waste bottle (nitrate test)			
Rubbish bag			
Clean tap water for washing hands			
Tissue for colorimeter tubes			
Paper towel			
Deionised water for rinsing test tubes and equipment			
Safety equipment			
First aid kit			
Sun cream and hat			
Gum boots			
Latex gloves and safety goggles			
Other			
Drinking water and food			
Emergency phone numbers:			

Before you leave the site, check the following:

- Is all the equipment cleaned?
- Is there any rubbish left behind?
- Has equipment in the kit been checked?
- Is any equipment broken or lost and so needs to be replaced?
- Have all the results been recorded?

Water quality results

This sheet is for recording your results. Photocopy the sheet each time you intend collecting data.

Background Information

Date: _____ Time: _____ Name of Group: _____

Name of investigators: _____

Name of waterbody: _____

Site code:

Map Name: _____

Easting (6 figs):

Northing (7 figs):

Type of Waterbody (tick a box):

- | | | |
|---------------------------------------|------------------------------------|---|
| Pond/wetland <input type="checkbox"/> | Lake/dam <input type="checkbox"/> | Bore/piezometer <input type="checkbox"/> |
| Drain <input type="checkbox"/> | Estuary <input type="checkbox"/> | Ocean <input type="checkbox"/> |
| Creek/stream <input type="checkbox"/> | River <input type="checkbox"/> | Irrigation channel <input type="checkbox"/> |
| Spring <input type="checkbox"/> | Inlet/bay <input type="checkbox"/> | |

Position in the catchment:

- upper middle lower

Estimated elevation: _____

Name of suburb, nearest town or settlement: _____

Brief description of site: _____

Comments: _____

Describe the weather both now and in the past 24 hours (tick a box):

- | | | | | | |
|---------------|--------------------------------------|-----------------------------------|----------------------------------|--|---------------------------------------|
| Weather now | Clear/sunny <input type="checkbox"/> | Overcast <input type="checkbox"/> | Showers <input type="checkbox"/> | Rain (steady) <input type="checkbox"/> | Rain (heavy) <input type="checkbox"/> |
| Past 24 hours | Clear/sunny <input type="checkbox"/> | Overcast <input type="checkbox"/> | Showers <input type="checkbox"/> | Rain (steady) <input type="checkbox"/> | Rain (heavy) <input type="checkbox"/> |

Water quality results

Record your results and the type of equipment and method and any preservation method you used, and mystery or replicate sample results

Parameter	Equipment item and number	Sample result (delete units that do not apply)	Replicate sample results	Mystery sample result	Mystery code no
Flow velocity		m/s	m/s		
Flow volume		L/s	L/s		
Temperature		°C	°C		
Turbidity		NTU metres	NTU metres	NTU	
Conductivity		µS mg/L	µS mg/L	µS mg/L	
pH		pH units	pH units	pH units	
Dissolved oxygen		mg/L % sat	mg/L % sat		
(Filterable) Dissolved reactive phosphate		mg/L P	mg/L P	mg/L P	
Total phosphate		mg/L P	mg/L P		
Nitrate		mg/L N	mg/L N		