

# GLOBAL WATER WATCH

## BACTERIOLOGICAL MONITORING DATA FORM

online

Group Name: \_\_\_\_\_

Collector(s): \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone N°: \_\_\_\_\_

Sample Date: \_\_\_\_\_ Sample Time: \_\_\_\_\_ GWW Site Code: \_\_\_\_\_

Watershed: \_\_\_\_\_ Waterbody: \_\_\_\_\_ County & State: \_\_\_\_\_

Sampling site location: \_\_\_\_\_

(Notify the GWW office about any changes in sampling site location.)

Waterbody condition: <input type="checkbox"/> Adequate Depth <input type="checkbox"/> Inadequate Depth <input type="checkbox"/> Dry <input type="checkbox"/> No Access			
Tidally influenced streams and rivers: <input type="checkbox"/> Rising Tide <input type="checkbox"/> Falling Tide <input type="checkbox"/> Uncertain			
Parameter	Value	Comments	
Air Temperature	_____ °C.	Measure air temperature before water temperature.	
Water Temperature	_____ °C.	Avoid touching thermometer bulb.	
Sample Volume	_____ mL	Use same volume for all replicates.	
Incubation Start Time	_____	Use 24 hour format e.g. 1:45 pm = 1345.	
Incubation Temperature	_____ °C.	Keep incubation temperature between 29 and 37° C.	
Incubation Period	_____ hrs	Count bacteria within 30 - 48 hrs of incubation.	
Media Expiration Date	_____ - _____	Use short date format e.g. May - 07.	
Plated on Site	<input type="checkbox"/> Yes <input type="checkbox"/> No	Plate off sampling site if possible.	
Transported on Ice	<input type="checkbox"/> < 3 hrs <input type="checkbox"/> No Ice < 30 minutes	Samples should be plated within 3 hours if in Ice and within 30 minutes if without Ice.	


Replicate No.	No. of E. coli colonies in plate (blue green to dark blue-purple) *	Text Code for general coliform colonies in plate (pink to dark red) **	No. of general coliform colonies *
1			
2			
3			

\* If colonies are too numerous to count report 250,  
 \*\* Text Code for general coliform: None (0), Rare (1-9), Common (10-100), Abundant (101-200), Too Numerous To Count (>200).

<b>Comments:</b> Note evidence of rainfall, runoff within previous 24 hours, unusual smell, unusual color, cows or other animals in creek, etc.	GWW Office Use

I hereby declare that at the time of this water sampling my GWW Bacteriological Monitoring Certification was current and that I confirmed the freshness of the sample media used for these tests.

**Signature:** \_\_\_\_\_

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