

Wisconsin Department of Natural Resources SWIMS Project Summary

General Project Information

Project ID: AEPP-028-06
Name: EAU CLAIRE AREA SCHOOL DISTRICT: Half-Moon Curly Leaf Monitoring
Type: Aquatic Invasives Grant
Subtype: Aquatic Invasives Education
Status: COMPLETE
Start Date: 04/01/2006
End Date: 12/31/2007
Purpose: The Eau Claire School District, in cooperation with the City of Eau Claire, and utilizing the talents of DeLong Middle School students, proposes to establish baseline densities for Curly Leaf Pond Weed in Half-Moon Lake, in Eau Claire County, and to monitor the effectiveness of city harvesting efforts. Major project elements to include: 1) GPS aided video sampling, 2) Data analysis, 3) reports and information sharing.
Objective:
Comments: Grantee is EAU CLAIRE AREA SCHOOL DISTRICT
Outcome:
Study Design:
QA Measures:

People

Name	Role	Status	Start Date	End Date	Organization	Comments
City of Eau Claire,	GRANT_RECIPII	COMPLETE	04/01/2006	12/31/2007	City of Eau Claire	

Project Statuses

Date	Reported By	Status	Comments
------	-------------	--------	----------

Actions

Action	Detailed Description	Start	End Date	Status
Information and Education Grant Awarded		04/01/2006	12/31/2007	PROPOSED
	AEPP-028-06Half-Moon Curly Leaf Monitoring	04/01/2006		COMPLETE
Data analysis, report production Grant Awarded		04/01/2006	12/31/2007	PROPOSED
	AEPP-028-06	04/01/2006	12/31/2007	COMPLETE

Monitoring Stations

Station ID	Name	Comments
------------	------	----------

Assessment Units

WBIC	Segment	Local Name	Official Name
2125400	1	Half Moon Lake	Halfmoon Lake

Lab Account Codes

Account Code	Description	Start Date	End Date
--------------	-------------	------------	----------

Forms

Form Code	Form Name
-----------	-----------

Methods

Method Code	Description
-------------	-------------

Wisconsin Department of Natural Resources SWIMS Project Summary

Fieldwork Events

Start Date	Status	Field ID	Station ID	Station Name
------------	--------	----------	------------	--------------

Documents

Title	Description	Author	Published	Comments
-------	-------------	--------	-----------	----------

Budget

Combined Budgets:

Combined SLOH:

Combined Total:

Funding

Organization	Source	Type	Amount	Start Date	End Date
--------------	--------	------	--------	------------	----------