

## Wisconsin Department of Natural Resources SWIMS Project Summary

### General Project Information

**Project ID:** CLMN-20090625-Iron River  
**Name:** Citizen Lake Monitoring Training - Iron River - 06/25/2009  
**Type:** Citizen Lake Monitoring  
**Subtype:** Training Sessions and Workshops  
**Status:** COMPLETE  
**Start Date:** 06/25/2009  
**End Date:** 06/26/2009  
**Purpose:** This workshop will take place from 6:00 pm – 9:00 pm at the Iron River Community Center, Iron River. To register for this workshop, or for more information, contact Stefania Strzalkowska, Aquatic Invasive Species Project Coordinator, Bayfield County. Phone: (715) 373-6167. E-mail: SStrzalkowska@bayfieldcounty.org The Citizen Lake Monitoring Network Aquatic Invasive Species (AIS) monitoring workshop speakers provide details on aquatic invasive species identification and lifecycles; instructions on how to organize an effective monitoring team; where and when to look for the invasives; as well as what to do if you suspect that you have found an invasive plant or animal. Most workshops will offer hands-on training for invasive species identification. Workshop hosts will offer participants a monitoring kit at no charge (one free kit per lake). Additional kits and supplies helpful in assisting you in collection and identification of the plants and animals may be offered “for sale” at the workshops. These materials are optional, but many volunteer found them useful. For more information on the CLMN program, visit: <http://www.uwsp.edu/cnr/uwexlakes/clmn>.  
**Objective:**  
**Comments:** 46.56420, -91.40513  
**Outcome:**  
**Study Design:**  
**QA Measures:**

### People

Name	Role	Status	Start Date	End Date	Organization	Comments
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### Project Statuses

Date	Reported By	Status	Comments
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### Actions

Action	Detailed Description	Start	End Date	Status
Train Volunteers to Monitor Lakes for Invasive Species	CLMN-20090625-Iron River	06/25/2009		COMPLETE

### Monitoring Stations

Station ID	Name	Comments
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### Assessment Units

WBIC	Segment	Local Name	Official Name
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### Lab Account Codes

Account Code	Description	Start Date	End Date
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### Forms

Form Code	Form Name
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### Methods

Method Code	Description
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<b>Method Code</b>	<b>Description</b>
AIS_MON_CLMN_2011	AIS CLMN Monitoring Procedures 2011

### Fieldwork Events

Start Date	Status	Field ID	Station ID	Station Name
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### Documents

Title	Description	Author	Published	Comments
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### Budget

Combined Budgets:

Combined SLOH:

Combined Total:

### Funding

Organization	Source	Type	Amount	Start Date	End Date
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