Michigan Department of Natural Resources - Parks and Recreation

STEWARDSHIP TREATMENT RECORD

PARK NAME: _____

COUNTY: _____

STEWARDSHIP MANAGEMENT UNIT(S): _____

SITE NAME: _____

PROJECT: _____

Activity: _____

TASK: _____

PERSONNEL INFORMATION

TASK LEADER NAME: _____

POSITION: _____

DNR STAFF	TASK HRS	TOTAL HRS	PAY RATE	TOTAL COST

☐ VOLUNTEER SIGN IN SHEET: NO. TOTAL VOL. HRS.

TREATMENT LOCATION MAP ☐ INVASIVE DATA FORM ATTACHED

			N W E S

ACREAGE COVERED: _____ SCALE: 1" = _____

WEATHER INFORMATION

24 HRS PRIOR: AVG TEMP: _____ PPT: Y / NO AMOUNT: _____

	WIND DIR	SPEED	TEMP	RH	PPT	CLOUD COVER
START:						
END:						

24 HRS AFTER: AVG TEMP: _____ PPT: Y / NO AMOUNT: _____

DATA ENTRY **STR FILE #**

☐ GIS (GPS/GPS COPY/DGTZ)	☐ MCCC Q-REPORT(S)
☐ VOLUNTEER DB	☐ GRANT TIME TRACKING
☐ TASK LIST	☐ GRANT REPORT(S)
☐ ANNUAL SUMMARY (PROJ/TASK)	☐ MANAGEMENT HISTORY

COST/FUNDING

TREATMENT COST: $ _____

TREATMENT COST PER ACRE: $ _____

FUNDING SOURCE(S):

EQUIPMENT & MATERIALS USED

LIST: _____

☐ GPS TYPE/FILE NAME: _____

☐ HERBICIDE(S) BRAND: _____

ACTIVE INGREDIENT _____ % ACTIVE _____

ADJUVANT(S): BRAND: _____ RATE: _____

ACTIVE INGREDIENT _____ % ACTIVE _____

DILUTION: _____ OZ/PARTS CONCENTRATE

TO _____ OZ/PARTS WATER OR OIL

= _____ %AI USED DYE USED: _____

TOTAL AMOUNT OF CONC. USED: _____

TOTAL AMOUNT OF ADJUVANT(S) USED: _____

T. AMOUNT OF MIX: _____ T. AMOUNT OF MIX USED: _____

AMOUNT OF MIX REMAINING AT END OF TREATMENT: _____

MODE OF APPLICATION: _____

APPLICATION EQUIPMENT _____

APPLICATION RATE: _____

HERBICIDE(S) COST/UNIT: _____

TREATMENT DESCRIPTION

DATE(S): _____

START TIME: _____ END TIME: _____

TASK HRS: _____ TOTAL TASK HRS: _____ TOTAL HRS: _____

DETAILED NARRATIVE OF TREATMENT:

TREATMENT RESULTS

NAME: _____ DATE: _____

FOLLOW-UP/RE-TREATMENT NEEDED: Y / NO

_____ _____

Project Leader Signature Date

DISTRIBUTION: Original to PRD Stewardship Unit, Lansing; Copy to Park