Tree Injury Report Form - Instructions

These instructions explain use of the Tree Injury Report Form. This form may also be used to report potential herbicide injury to other woody and herbaceous plants.

PLEASE NOTE: Monitor/witness information is for data verification ONLY and will remain private. While tree health information will be shared publicly, all personal information and detailed site location information will NOT publicly visible.

It is preferred that you scan and email a copy of your completed form(s) and photos to: monitoring@prairierivers.org

Photos must be emailed however, you may also mail a hard copy of the form (keep one for your records) to: Monitoring - Attn: Kim Erndt-Pitcher Prairie Rivers Network 1605 S. State St., Suite 1 Champaign, IL 61820

The Form is one sheet and two pages (front and back). Under most circumstances, an entire observation can be made using Page 1. Page 2 contains opportunities for alternative information or expanded data collection. It also includes some helpful reminders regarding data categories. More than one Form can be used if there is a need. Be as complete as time, equipment, and experience allow. Take photos where possible to document observations. Instructions for photos are included on page 5.

Items marked* = complete only once per site visit

Items marked** = complete only once per site

Observer and Location Information

| Sheet_ | of | _; | Identify ea | ach da | tashe | et | used | l for | this | date | an | d sit | e (e.g. | , _ | <u>L</u> of | _1_) | . If | two |
|--------|----------|------|--------------|--------|-------|----|------|-------|------|------|----|-------|---------|-------|-------------|------|------|-----|
| sheets | are used | d, e | entries woul | d be: | _1_ | of | _2_ | and | _2 | _of | 2_ | for t | he fir | st ar | d se | cond | she | ets |
| respec | tively. | | | | | | | | | | | | | | | | | |

First Name & Last Name: Data are for the person responsible for the observation. Use a consistent name for all sheets you submit.

Address*, City*, Zip*, County, Phone Number*, E-mail*:** Complete for first sheet submitted. Optional thereafter.

Date: Preferred format is mm/dd/yy.

Witness Name (optional): If another individual was present and will vouch for the observation, record their name. More than one name may be submitted.

Site ID: Use an appropriate name (e.g., Prairie of the Rock Nature Preserve). Use exact same name for subsequent observations, at the same site, if any.