



SALMON PROTECTION AND WATERSHED NETWORK

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**Naturalist Tour, Shift and Reconnaissance Form
(Fill Out After Your Shift)**

Naturalist Name(s): _____ **Date:** _____
(including shadows)

Type of Tour: Guided Creek Walk ___ Station Naturalist ___ Reconnaissance ___

Number of Visitors: Guided Creek Walk ___ or Station Naturalist* ___
(*list approx # whom you interacted with)

Duration of Shift: _____

Locations visited on Guided Tour; occupied as a Station naturalist or on Recon. (PLEASE LIST NUMBER OF FISH SEEN AT EACH LOCATION THAT YOU WERE AT):

Comments about the tour, station or recon (interesting events – jumping, spawning, a new redd discovered, personal reflections etc.): _____

Do you or did any visitors have a question that you would like addressed?: _____
