

AQUATIC PLANT IDENTIFICATION FORM

Schutter Diagnostic Lab
119 Plant BioScience Facility
Montana State University
Bozeman, MT 59717
406-994-6297

Montana Department of Agriculture
Weed Program
6th and Roberts
Helena, MT 59620

Date: _____ (MM/DD/YY)

Client Name: _____ Email: _____

Address: _____ Phone: _____

Notes on submitting aquatic samples: *Aquatic samples deteriorate quickly. Ideally they should be wrapped around numerous layers of wet paper towel, placed in a sealed ziplock bag and submitted in a Styrofoam cooler with an ice pack. If it is not possible to submit in a cooler, we recommend (1) expediting shipping and (2) taking pictures so that we may try to identify it with photos if it has deteriorated upon arrival. To photograph: lay the sample out and take pictures of the following: leaf arrangement (alternate, opposite or whorled); leaf shape; roots (if present); and any flowers or seed (if present).*

1. Sample collected by: _____ Phone: _____

Address: _____

2. Sample was collected in this Montana County: _____

3. Sample was collected in this habitat (circle proper item or specify below):

STREAM/RIVER | POND (<10 ACRES) | AQUASCAPE (ORNAMENTAL POND) | LAKE (>10 ACRES) |

Name of stream/river, pond, or lake, if known: _____

OTHER (SPECIFY HERE): _____

4. Sample is this kind of plant (circle proper item): LANDSCAPE | WILD PLANT | OTHER

5. Sample is from this form of plant: (circle proper item): MOSS | BROADLEAF PLANT | GRASS PLANT | UNKNOWN

6. Prevalence: (circle proper item): JUST ONE | SCATTERED FEW | SEVERAL | ABUNDANT

7. Other plant information: _____

8. Email identification information: yes no: email address: _____

COUNTY _____ Agent _____

COMMENTS (for use by MDA or Herbarium) _____
