

Preble's Meadow Jumping Mouse, *Zapus hudsonius preblei*
2004 Survey Field Data Compilation Form

☐ TRAPPING SURVEY ☐ EVALUATED, NOT TRAPPED

Fill out both sections 1 and 2 if trapping survey, fill out section 1 only if habitat evaluation (ie. not trapped). Compilation forms needed for updated habitat evaluations and site disqualification requests.

SECTION 1

Surveyor:

Date of Site/Habitat Assessment _____

Organization/Company _____

Full Name(s) _____

Location:

Project Name (if applicable) _____

Project Description (nearby road intersection, type of impact, etc.) _____

U.S.G.S. Quad Name _____ County _____ Elevation _____

Township(s) _____ Range(s) _____ Section(s) _____

¼¼ Section(s) _____

UTM Coordinates, Zone 13 Northing _____ Easting _____

UTM Coordinate Datum NAD27 ☐ NAD83 ☐

Directions to Location _____

Land Ownership _____

Habitat:

General Habitat Description _____

Dominant Overstory Plant Community _____

Dominant Understory Plant Community _____

Current Land Use _____

Drainage Name: _____ Type: Perennial Stream _____

Ephemeral Stream _____ Pond/Lake _____ Ditch _____ Other _____

SECTION 2:

Z. h. preblei found ? Yes ☐ No ☐ Dates of Survey _____

Trapping Information:

Type of Traps _____ Type of Bait _____

% Available (unsprung) _____ Number of Nights Trapped _____

Total Trapnights _____

Weather conditions prior to and during survey _____

Associated Animal Species (especially urban predators, rats, house mice) _____

Sketch of surveyed area showing traplines, specific area disqualified (can be done on required U.S.G.S. map of site if appropriate).

Preble's Data:

Number of Preble's trapped or seen _____

Distance from water (m) Sex (m/f) Evidence of repro.* Weight (grams). Marked or tagged?

1.

2.

3.

4.

(Continue on separate sheet if needed)

* Reproduction evidence for males is descended testes, for females is enlarged nipples.

Evidence of disease, predation or injury _____

(Submit injury/mortality form if appropriate)

Genetic Material Obtained? Yes _____ No _____ Forwarded to _____

Specimen(s)? Yes _____ No _____ Forwarded to _____

Additional Comments:

(SUBMIT THIS FORM WITH THE SURVEY REPORT WHEN APPROPRIATE)
***Zapus hudsonius preblei* Injury/Mortality Documentation**

- _____ Found dead
_____ Found severely injured, euthanized
_____ Slightly injured, returned to wild
_____ Died during handling

Date/Time: _____

Location: _____

Weather Conditions: _____

Approximate Time Trap Set: _____

Time Trap Checked: _____

Field Technician(s) Present: _____

Information:

PIT TAG Number: _____

Weight (g): _____

Total Body Length (mm): _____

Tail Length (mm): _____

Hindfoot Length (mm): _____

Ear Length (mm): _____

Sex: _____

Reproductive Condition(s): _____

Description of Injury: _____

Details of Probable Reasons for Injury or Mortality: _____

Signature of Technician(s):