

MEXICAN WOLF REINTRODUCTION PROJECT

NON-PROJECT PERSONNEL — WOLF OBSERVATION REPORT

Date of Observation: _____

Date of Report: _____

Observer(s):

Recorder:

Name: _____

Name: _____

Mail Address: _____

Mail Address: _____

City/State: _____ Zip _____

City/State: _____ Zip _____

Phone: _____

Phone: _____

Details of Location:

Private land Public land Other, specify: _____

Location Specifics (road #'s, landmarks, mileposts, etc.): _____

Habitat Description (open, forested, drainage, vegetation, visibility, etc.): _____

Details of Observation/Occurrence:

Approximate time of sighting: _____ Distance between you and wolves: _____

Length of observation: _____

Was the wolf aware of your presence? _____ if so, what was it's response?: _____

Observation Type:

Live wolf Dead wolf Den Kill Tracks
 Howling Other, specify _____

Observation By:

Naked Eye Binoculars Rifle scope
Number of Animals _____ (if known: _____ Adults _____ Young adults _____ Small pups)
Did you observe radio collars?: No Yes If yes, how many wolves with collars? _____
What color were the collars? _____

Physical Description of wolves (color/markings, size, tail position, etc.):

Narrative account of observation:

