

PRINTABLE OBSERVATION SHEET

Site # _____	
Date:	Time:
Sun Exposure (Circle one): Full Parital Shady	Ground Cover (Circle all that apply): Leaf Litter Plants Bare Soil Rocks Gravel Other
Nearby Plants:	Site Description:
Sketch of Site:	

Y-AXIS
3 ft.

X-AXIS | 3 ft.

CHART:

Site:	#1	#2	#3
Total Number of Bugs			
Total Number of Bug Types			