

PENNSYLVANIA RARE BIRD REPORT FORM

This form is presented as a convenience and guide. It can be used if desired, but is not necessary for submitting a report. Species requiring documentation are those on the Review List or not on the Official List of Birds of Pennsylvania. Send documentation to:

Nick Pulcinella, Secretary
Pennsylvania Ornithological Records Committee
613 Howard Ave.
West Chester, PA 19380
nickpulcinella@verizon.net

SPECIES (common and scientific name) _____

Subspecies (if known) _____

NUMBER OF INDIVIDUALS _____ **SEX(ES)** _____

AGE(S) AND PLUMAGE(S) (e.g. immature; adult in breeding plumage; year for gulls; basic or alternate if you prefer those terms; state of molt if applicable): _____

DATE OF OBSERVATION _____ **TIME** _____

LOCATION (city, borough, township) _____

EXACT SITE (e.g. name of park, lake, road) _____

OBSERVER REPORTING:

Name _____

Address _____

City _____ State _____ ZIP _____

e-mail (optional) _____ phone (optional) _____

OTHER OBSERVERS (only those who saw and identified the bird with you):

HABITAT (e.g. mowed field, woodland edge, any other details) _____

DISTANCE TO BIRD _____

VIEWING CONDITIONS (sky, weather, position of sun relative to you) _____

OPTICAL EQUIPMENT USED _____

DESCRIPTION (Include as much detail as you observed – size relative to other species present; “jizz”= e.g. posture, body shape, and proportions; colors and patterns of plumage; bill, eye, and leg characteristics; other features relevant to this individual): _____

(Please use an additional page if necessary.)

BEHAVIOR (be as detailed as possible about what the bird was doing) _____

VOCALIZATIONS

SUPPORTING EVIDENCE IF ANY:
Photograph _____ **Video recording** _____ **Audio recording** _____ **Drawing** _____
Photographer/recorder/illustrator:
Name _____
Address _____
City _____ State _____ ZIP _____
e-mail (optional) _____ phone (optional) _____

Please include a copy of the photograph or recording with your report, and accompany it with a complete written documentation if the identification is obvious to you. If you made a drawing, please include it.

IF THIS IS A DEAD BIRD:
General condition _____
If collected (by permit), location and number of specimen if known _____

SEPARATION FROM SIMILAR SPECIES (how you eliminated others) _____

DISCUSSION – Anything else relevant to the observation that will aid the committee in evaluating it

(Please use an additional page if necessary)

PREVIOUS EXPERIENCE WITH THIS AND/OR SIMILAR SPECIES

ARE YOU POSITIVE OF YOUR IDENTIFICATION ? (why or why not) _____

REFERENCES CONSULTED:
During observation _____
After observation _____

DATE OF THIS REPORT: _____

SIGNATURE OF OBSERVER _____