

**Wisconsin Turtle Conservation Program
Road Crossing Mortality & Turtle Sighting Form**

Observer Contact Information

Name: _____
Phone: _____
Email: _____



Date: ___/___/_____

County: _____

GPS Point: N _____° W _____°

Location Description:

Observance Type (**Circle**):

Road Crossing Mortality Live Road Crossing Nesting Area General Observation

Species Name (**Circle**):

**Blanding's Turtle Eastern Musk Turtle False Map Turtle Northern Map Turtle
Ornate Box Turtle Southern Map Turtle Painted Turtle Smooth Softshell
Snapping Turtle Spiny Softshell Wood Turtle
Red-eared Slider (non-native) Eastern Box Turtle (non-native)**

Turtle Description & Number Observed:

Habitat Description:

Road*: _____

Nesting Area Description* (sandy beach, island river, gravel pit, etc...):

**Fill out if you selected "Road Crossing Mortalities" or "Nesting Areas".*

Mail completed form +
any photographs to: Wisconsin Turtle Conservation Program
Bureau of Natural Heritage Conservation
Wisconsin Dept. of Natural Resources
P.O. Box 7921
Madison, WI 53707-7921

This information may also be
submitted online at:

<http://wiatri.net/inventory/WiTurtles>