



Transported to: _____
 Disposition: _____
 Species: _____
 Rec'd Date: _____
 Transport Date: _____

WILD LIFE TRANSPORT FORM

Volunteer Name: _____ Home #: _____ Miles Traveled: _____
 Address: _____ Work #: _____ Cell #: _____
 City: _____ St: FL Zip _____ County: _____

Second Transporter: _____

Please answer the following questions completely so that we may insure the best care possible.

Where did you find the bird? Street name or closest intersection. It was found at:

Street Address: _____

Persons name that called: _____ Phone Number: _____

City: _____ County: _____

Please try and always record this information. If it turns out the bird was shot, this information is critical to file a report with FWC law enforcement. It also helps us know where to return the bird to upon release.

What was the situation you found the bird in (i.e. lying in the road)? _____

What caused the bird's injury, if known? (i.e. hit by car) _____

When did you find the bird? Date: _____ Time: _____ (AM or PM) *circle one*

Was the bird fed? *circle one* Yes No Did it drink water? *circle one* Yes No

If yes to either, what did it eat/drink and how much if known: _____

Was medical care given *circle one* Yes No

If yes, please explain and attach copies of medical records:(write notes on back) _____

Please provide any other information that we need to know about this wildlife.

BABY BIRDS:

Do you know where the nest is located? _____

Have you seen the parents in the area of the nest? Yes No *circle one*

Is the bird a candidate for re-nesting? Please explain why you believe it is or is not possible to re-nest. Provide pictures of the tree please. They can be texted to 813-205-1851

