Outline for Sea Turtle Captive Care Annual Report
Due February 1 of Each Year

NOTE: All topics listed below need to be addressed in your report. The following outline should be used as it provides a more complete and standardized description across all facilities. All measurements should be reported using the metric system.

I. DESCRIPTION OF FACILITY
   A. Facility mission
   B. Annual attendance
   C. Brief description of facility
   D. List of veterinarians and animal care staff working under the permit along with their sea turtle experience

II. SEA TURTLES ON EDUCATIONAL DISPLAY (excluding sea turtles under medical care)
   A. January through December summary of the number and species of sea turtles on educational display
      1. Number and description of tanks (surface area and depth) and number and size of sea turtles housed in each tank
      2. For each turtle provide: internal turtle id, STSSN id (if applicable), species, date acquired, purpose of acquisition, origin, date put on display (tour), status, sex (if known), mass, curved carapace length (max), curved carapace width, diet, release information (date, location, applicable tag numbers, mass and morphometrics at release), FP positive, additional comments (example of table provided below)
   B. Evaluation of non-releasable animals
   C. Copy of the current hatchling plan including any proposed changes for upcoming year

III. SEA TURTLES UNDERGOING REHABILITATION (excluding sea turtles displayed for education)
   A. January through December summary of the number and species of sea turtles undergoing rehabilitation
      1. Number and description of tanks (surface area and depth) and number and size of sea turtles housed in each tank
      2. For each turtle provide: internal turtle id, STSSN id (if applicable), species, date acquired, purpose of acquisition, origin, date put on display (tour), status, sex (if known), mass, curved carapace length (max), curved carapace width, diet, release information (date, location, applicable tag numbers, mass and morphometrics at release), FP positive, additional comments (example of table provided below)

IV. DISPLAY (TOUR) OF SEA TURTLES UNDERGOING REHABILITATION
   A. Annual Summary
      1. Days of week that tours were conducted and the time of each tour
      2. Number of scheduled and unscheduled tours, number of visitors per tour, number of staff per tour, total annual number of visitors on scheduled tours, ratio of staff to visitors on scheduled tours, medical condition of each turtle involved in the tours, and the release date of the turtle(s).
      3. Number of tours to schools, annual total number of students educated
      4. Number of scheduled and unscheduled public relation or media related events in sea turtle rehabilitation facility
V. BIOLOGICAL DIAGNOSTIC SAMPLES
   A. List of biological diagnostic samples currently stored at facility

VI. RESEARCH REPORT
   A. Copy of U.S. Fish and Wildlife Service research permit(s)
   B. Summary of research conducted

VII. EUTHANASIA REPORT
   A. List of sea turtles (with internal and/or STSSN id) that were euthanized along with a description of the circumstances of their capture and reasons for euthanasia.

VIII. PRE-ACT REPORT
   A. A summary of the number and species of sea turtles in the facility that was collected prior to listing under the Endangered Species Act. Include information confirming that these turtles are kept in a separate tank from non pre-Act turtles and that adult male and female turtles are maintained separately.

IX. CONCERNS, COMMENTS AND RECOMMENDATIONS
   A. List concerns, technical difficulties, comments and recommendations
   B. Update to list of diagnostic facilities

<table>
<thead>
<tr>
<th>Turtle ID</th>
<th>Species</th>
<th>Date Acquired</th>
<th>Purpose of Acquisition</th>
<th>Origin</th>
<th>Date Put on Display (tour)</th>
<th>Status</th>
<th>Sex</th>
<th>Mass</th>
<th>CCL max</th>
<th>CCW</th>
<th>Diet</th>
<th>RELEASE INFORMATION</th>
<th>FP Positive</th>
<th>Comments</th>
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