

Initial Visit Checksheet

*Observation Date: _____ *Observer: _____

*Location (Loop Name): _____

*Organizational Affiliation (Chapter Name): _____

*Site Number: _____

Use the alphanumeric site number found on the VBWT loop pages (e.g. CES01).

*Site Name: _____

*Adopt-a-Trail ID: _____

IMPORTANT NOTE: This number is DIFFERENT than the alphanumeric site number displayed on a loop page. The Adopt-a-Trail ID number is located in the green footer at the bottom of each individual site's webpage, just beneath the copyright date.

1. * Is the physical entrance address for the site listed and correct on the online guide? **If NO**, please provide the correct address. In the event that a physical address does not exist, please complete question 3 below.

2. * Does the Google Maps button accurately navigate you to the site? (Did you arrive at the parking lot, site entrance or starting point?) **If NO**, please complete question 3 below.

Yes

No

3. If the site does not have a physical address or the site entrance is incorrectly reflected on the loop map and/or Google Map window, please provide the latitude and longitude of the site entrance in decimal degrees format (e.g. 38.004158, -78.478901).

4. * Are the driving directions accurate and point to the site from a municipality? **If NO**, please provide the suggested corrections.

5. * Is the site description accurate on the website? **If NO**, please describe what you think should be added or removed from the description.

6. * Does the website button under "Site Information" accurately link to the site's webpage? **If NO**, please provide the correct/updated URL.

7. * Are there any changes that need to be made to the facilities listed on the webpage? **If YES**, please circle the changes in questions 8 and 9 below.

Yes

No

8. Facilities to be ADDED to website:

Bike Trails	Camping	Observation Platform	Hiking Trails	Handicap Accessible
Lookout Tower	Parking	Primitive Camping	Interpretive Trail	Interpretive Nature Program
Picnic	Restrooms	Viewing Blinds	Tram Tours	Kayak/canoe Launch
Food	Lodging	Canoe/Kayak Rentals	Boat Ramp	Scenic Drives/Driving Tours
	Historical Sites	Beach	Boat Tours	Visitor/Nature Center

9. Facilities to be REMOVED to website:

Bike Trails	Camping	Observation Platform	Hiking Trails	Handicap Accessible
Lookout Tower	Parking	Primitive Camping	Interpretive Trail	Interpretive Nature Program
Picnic	Restrooms	Viewing Blinds	Tram Tours	Kayak/canoe Launch
Food	Lodging	Canoe/Kayak Rentals	Boat Ramp	Scenic Drives/Driving Tours
	Historical Sites	Beach	Boat Tours	Visitor/Nature Center

10. * Does the online guide page for the site have an eBird link to view seasonal observations? **If NO**, but there is an existing hotspot in eBird, please provide the hotspot name below.

11. * Does the site have any MAJOR public access issues? (e.g. looks unsafe or unwelcoming, not open to the public, "No Trespassing" signs are posted, owner indicates they no longer want to participate in the VBWT, etc.). **If YES**, please provide us with additional information regarding the public access issues you observed onsite.

12. *Are there any other corrections that need to be made to the online guide for this site?
If YES, please list the inaccuracies and/or the needed corrections.

13. * Please rate how satisfied you were with your OVERALL experience at the site today.

Extremely satisfied Satisfied Neutral
Dissatisfied Extremely dissatisfied

Please make an effort to contact a site representative (e.g. an owner or a manager) in advance of your visit to touch base about the VBWT and the Adopt-a-Trail program.

Example Script: Hi, My name is _____. I'm a Master Naturalist for the _____ Chapter. Our Chapter has partnered with the Virginia Department of Wildlife Resources to adopt the _____ Loop of the Virginia Bird and Wildlife Trail, in which this site participates. DWR created this Adopt-A-Trail project to help maintain the Virginia Bird and Wildlife Trail. Do you have a few minutes to answer some questions?

* Date of Contact with Site Representative: _____

* Name of Site Representative: _____
This information is for internal working purposes only and will not be shared with the public

* Title of Site Representative: _____
This information is for internal working purposes only and will not be shared with the public

* Preferred phone number for site representative: _____
This information is for internal working purposes only and will not be shared with the public

* Preferred email address for site representative: _____
This information is for internal working purposes only and will not be shared with the public

Best public-facing phone number for the site: _____
If no public-facing phone number exists, leave this field blank

Best public-facing email address for the site: _____
If no public-facing email address exists, leave this field blank

* Does the site contact information under the "Site Information" heading on the Online Guide display the public-facing contact information listed above?

Yes

No

* Was the site representative aware that the site was included on the VBWT?

Yes

No

* Would the site representative like to receive annual updates on the species that were observed at this site throughout the year?

Yes

No

* Would the site representative like a VBWT logo file to use on their website or any print materials to show that they are a designated site on the VBWT?

Yes

No

* Do you recommend the removal of this site from the Virginia Bird and Wildlife Trail? If YES, please explain why. This question is NOT for the site owner. It is to be answered independently by the AAT volunteer completing the checksheet.
