

Behavioral Observation Report

Date: ____/____/____

Approximate Specimen Age: ____/____/____

Specimen ID#: _____ Specimen Ref. # : _____

Species: _____

Common Name: _____

Specimen Gender: _____

Color / Pattern Phase: _____

Intergrade: _____

Incest Bloodline: _____

Date Of Last Successful Feeding : ____/____/____

Date Of Last Shedding : ____/____/____

Date Of Last Defecation : ____/____/____

Date Of Last Urination : ____/____/____

Date Of Last Copulation : ____/____/____

Date Of Last General Health Examination : ____/____/____

Last Total Health Rating :

Critical Severe Poor Fair Good Excellent

_____ %

