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GARBOLOGY CHECKLIST
Garbology Step 1

School: _____ Test Site: _____ Date (mm/dd/yyyy): _____

Time (Beginning of Survey): _____ Time (End of Survey): _____ Monitoring Group: _____

Wind Direction: _____ Wind Speed: _____ (1=no wind, 2=slight, 3=moderate, 4=heavy, 5=gale) Brief Description of Weather: _____

Cloth:	**Item tally**
Canvas	
Clothing	
Tent material	
Cloth pieces	
Other (specify)	
Total cloth:	

Glass:	
Beverage bottles	
Food jars	
Light bulbs/tubes	
Glass pieces	
Other (specify)	
Total glass:	

Metal:	
Aerosol cans	
Beverage cans	
Bottle caps	
Crab and lobster traps	
Food cans	
Motor oil container	
Soda cans	
Pull tabs	
Wire	
Metal pieces	
Other (specify)	
Total metal:	

Paper:	
Bags	
Cardboard	
Cigarette butts	
Cups	
Newspaper/magazines	
Plates	
Paper pieces	
Other (specify)	
Total paper:	

Wood: (please leave branches, etc.)	
Crates	
Discarded lumber	
Pallets	
Other (specify)	
Total wood:	

Plastic:	**Item tally**
Beverage bottles	
Buckets	
Cigarette lighters	
Container lids/bottle screw caps	
Cotton/cotton swabs	
Cups/eating utensils	
Diapers	
Fishing lures	
Fishing line/net	
Food/sandwich wrappers	
Oil containers	
Rope	
Six-pack rings	
Straws	
Syringes	
Tampon applicator	
Toys	
Trash bags	
Plastic pieces	
Other (specify)	
Total plastic:	

Plastic foam (Styrofoam-like):	
Cups	
Buoys	
Egg cartons	
Fast-food containers	
Fishing bobbers	
Meat trays	
Packing material	
Plates	
Plastic foam pieces	
Other (specify)	
Total plastic foam:	

Rubber:	
Balloons	
Condoms	
Gloves	
Tires	
Rubber pieces	
Other (specify)	
Total rubber:	

TOTAL ITEMS COLLECTED _____

NOTES: (i.e., recurring items, majority of land or water-based items, etc.)

_____
_____
_____
_____