UFO Research Queensland Inc.

www.uforq.asn.au

SIGHTING REPORT FORM

The questions below have been designed to assist us in the interpretation of phenomenon observed by yourself. Please print these questions, complete those pertinant and, where possible, provide diagrammatical sketches to aid us in the interpretation of your report.

Name (optional) _____ Age _____

Address (optional) _____

_____ Postcode _____

Occupation (optional) _____

Date of sighting: Day _____ Date _____ Year _____

Time of sighting _____ Duration _____

How you established the time and duration _____

_____

Your exact position and location _____

_____

_____

Where were you when you first observed the object - ie outdoors, indoors, in a car, in an aircraft, other

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Were you looking through a windscreen, glass, double glass, curtains, spectacles, other

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How was the object observed- ie naked eye, binoculars, telescope, radar, other

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What were you doing when you first observed the object - ie lying down, sitting, standing, driving, other

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How did the object come to your attention - for example, you heard a sound, saw a light, someone called your attention to it, you saw the object move, animals reacted, electrical interference, other

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How large was its apparant size? Star size, moon size, larger than these, other (if in doubt, the easiest way to determine this is to hold a suitable object, eg. a coin or ball etc, at arms length and quote the familiar object that just covers your estimate or memory of the size of the object in question)

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_____

What was its shape and colour_____

_____

_____

Was it clearly outlined _____

Did it separate into parts and if so, how many parts _____

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_____

Did you notice any of the following on the object: seams, windows, lights, steady lights, pulsating lights, antenna, appendages, other

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What did it do - ie, moved across the sky, hovered in the sky, hovered near the ground, rotated, moved in a straight line, moved erratically, changed direction, landed, took off, other

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_____

How was it lost to view? In what direction and at what angle to the horizon

_____

_____

Could you estimate its speed and direction _____

_____

_____

Where was the object when first seen - North, South, East, West, Northeast, Southeast, Northwest, Southwest, high in the sky, treetop level, on the ground, at what angle to the horizon

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_____

Did the object pass in front of or behind anything, and if so, what: cloud, tree, hill, other

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_____

Indicate the angle of sighting, and compass direction of the start and finish of the sighting.

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_____

_____

Where there any effects on the following: radio, television, engines, lights, clocks, animals, witnesses, other

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_____

Did you notice any physcial effects or evidence? Illness, electromagnetic imprints, residue, vegetation change, smoke, vapour trails, noise, vibrations, heath, other

_____

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_____

What were the weather conditions at the time - clear, partly clear, full cloud cover, rain, smog, hazy, windy, sunny, electrical storms, tornadoes, other

_____

Did you see any of the following: aircraft, balloons, birds, searchlights, moon, stars, planets, other

Describe the area of sighting: city, suburb, rural, industrial, commercial, residential, isolated, other

Did the sighting occur over: reservoir, lake, river, sea, military installation, power station, powerlines, other area that you feel significant in relation to the sighting

Is there any photographic evidence

Relate your experience your own words

If you wish to forward a sketch of the object, please include the shape and colour of any features.

Names and contact details of other witnesses (optional)

Do you have any qualifications which might help you identify what you saw - ie above average knowledge of astronomy, meteorology, satellites, aircraft, other

Have you read any UFO literature Yes / No

Have you had or do you know of other sightings, and if so, please describe them:

Did you report this sighting to any other source - airport, police, airforce, other UFO groups, other

If we publish this account in our research journal or elsewhere, may we use your name in connection with it? Yes / No

THANKYOU!

Please forward completed reports to:
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AUSTRALIA