

TRASH COLLECTED

Citizen scientist: Record the total number of items picked. Record the total number of items picked up by volunteers at the Cleanup site. The data you record up by volunteers at the Cleanup site. The data you record are important for creating solutions for Trash Free Seas. are important for creating solutions for Trash Free Seas.®

EXAMPLE:

28

Plastic Bags

Please DO NOT use words or check marks. Only numbers are useful data.

TOTAL	MOST LIKELY TO FIND ITEMS	TOTAL	
<input type="text"/>	Cigarette Butt	<input type="text"/>	Beverage Bottles (Glass)
<input type="text"/>	Food Wrappers (candy, chips, etc.)	<input type="text"/>	Beverage Cans
<input type="text"/>	Take Out/Away Containers (Plastic)	<input type="text"/>	Grocery Bags (Plastic)
<input type="text"/>	Take Out/Away Containers (Foam)	<input type="text"/>	Other Plastic Bags
<input type="text"/>	Bottle Caps (Plastic)	<input type="text"/>	Paper Bags
<input type="text"/>	Bottle Caps (Metal)	<input type="text"/>	Cups & Plates (Paper)
<input type="text"/>	Lids (Plastic)	<input type="text"/>	Cups & Plates (Plastic)
<input type="text"/>	Straws/Stirrers	<input type="text"/>	Cups & Plates (Foam)
<input type="text"/>	Forks, Knives, Spoons	<input type="text"/>	Beverage Sachets/Pouches
<input type="text"/>	Beverage Bottles (Plastic)		
TOTAL	FISHING GEAR	TOTAL	OTHER TRASH
<input type="text"/>	Fishing Buoys, Pots & Traps:	<input type="text"/>	Appliances (refrigerators, washers, etc.):
<input type="text"/>	Fishing Net & Pieces:	<input type="text"/>	Balloons:
<input type="text"/>	Fishing Line (1 yard/meter = 1 piece):	<input type="text"/>	Cigar Tips:
<input type="text"/>	Rope (1 yard/meter = 1 piece):	<input type="text"/>	E-cigarettes/Vapes:
<input type="text"/>	Foam Dock Pieces	<input type="text"/>	Cigarette Lighters:
TOTAL	PACKAGING MATERIAL	<input type="text"/>	Construction Materials:
<input type="text"/>	6-Pack Holders:	<input type="text"/>	Fireworks:
<input type="text"/>	Other Plastic/Foam Packaging:	<input type="text"/>	Tires:
<input type="text"/>	Other Plastic Bottles (oil, bleach, etc.):	<input type="text"/>	Electronic waste:
<input type="text"/>	Strapping Bands:	<input type="text"/>	Clothing:
<input type="text"/>	Tobacco Packaging/Wrap:	<input type="text"/>	Shoes:
TOTAL	PERSONAL HYGIENE	<input type="text"/>	Toys:
<input type="text"/>	Condoms:	<input type="text"/>	Other plastic waste:
<input type="text"/>	Diapers:	<input type="text"/>	Metal:
<input type="text"/>	Syringes:	<input type="text"/>	Rubber:
<input type="text"/>	Tampons/Tampon Applicators:	<input type="text"/>	Paper:
<input type="text"/>	Gloves & masks (PPE):	<input type="text"/>	Cardboard:
<input type="text"/>	Cotton Swabs:	TOTAL	TINY TRASH LESS THAN 2.5CM:
<input type="text"/>	Band-Aids:	<input type="text"/>	Foam Pieces:
<input type="text"/>	Wipes:	<input type="text"/>	Glass Pieces:
		<input type="text"/>	Plastic Pieces:

DEAD/ INJURED ANIMAL	STATUS	ENTANGLED	TYPE OF ENTANGLEMENT
	Dead or Injured	Yes or No	
	Dead or Injured	Yes or No	
	Dead or Injured	Yes or No	

COORDINATOR

OCEAN TRASH DATA FORM



DEAR CLEANUP COORDINATOR:

Thank you for your hard work, dedication and valuable time spent for this important cause! We appreciate your commitment and passion for trash free seas.

Before you complete this form, compile all data from the Volunteer Ocean Trash Data Form. For each item of trash, add the total number of pieces and enter this number in the "Total" box on the back of this data form. Numbers are the only valid form of data, so please DO NOT use words or check marks in the boxes next to ocean trash

Name: _____

Email: _____

CLEANUP SITE DESCRIPTION

Type of Environment (choose one):

- Saltwater (Ocean/Bay/Estuary)
- Freshwater (River/Stream/Lake)
- Inland (No Water Body Present)

Mode of Data Collection (choose one):

- Land (beach, shoreline or inland)
- Underwater
- Watercraft (powerboat, sailboat, kayak or canoe)

CLEANUP SITE LOCATION

Cleanup Site Name (beach, park, etc.): _____

State or Province: _____

Zone or County: _____

Country: _____

Nearest Crossroad/Landmark: _____

CLEANUP SUMMARY

Month: _____	Day: _____	Year: _____	Total Number of Volunteers at this site: Adults: _____	Children: _____
Total Weight of Trash Collected: _____	lbs. or _____	kgs. _____	Total Number of Trash Bags Filled: _____	
Estimated Distance Cleaned: _____	1/4 _____	1/2 _____	3/4 _____	1 _____ 2 _____ 3 _____ 4 _____ 5 _____ (circle one) Other: _____
Distance Measured In: _____	Miles _____	or _____	Kilometers _____	(circle one) _____

MOST UNUSUAL ITEM(S) COLLECTED:

1. _____	2. _____	3. _____
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ITEMS OF LOCAL CONCERNS:

1. _____	2. _____	3. _____
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Please return this form along with all Data Forms to your State/Country Coordinator.

State/Country Coordinators: Please submit Summary Data into the online Data Collection and Reporting Tool at www.coastalcleanupdata.org.



If you are unable to contact your State or Country Coordinator, please mail or email this form to:

Ocean Conservancy
Attn: International Coastal Cleanup
1300 19th Street, NW, 8th Floor Washington, DC 20036

cleanup@oceanconservancy.org www.oceanconservancy.org/cleanup