

Observation Form

Student Name: _____

Date: _____

Telescope: _____

Time: _____

Object Name: _____

Brightness (bright, moderate, dim): _____

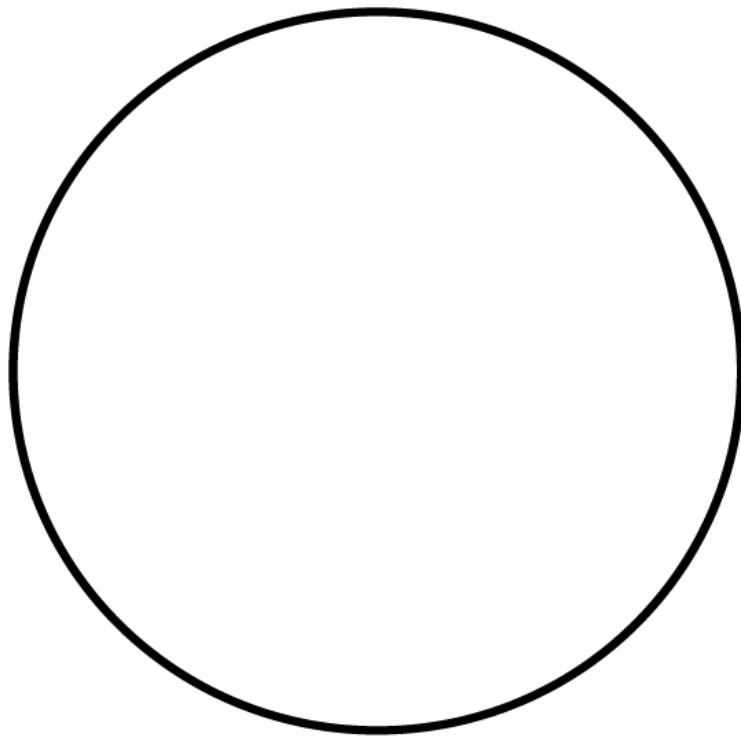
“Point-like” or extended (fuzzy)? _____

Single object or multiple objects? _____

Color: _____

Comments on appearance (completely subjective, What does it look like?):

Sketch what you see in the eyepiece:



Why did you choose this telescope as the “best”?