



A.L.P.O.SOLAR SECTION
ACTIVE REGION DRAWING REPORT FORM

SKY/SITE

Date/Time(UT) _____

Rotat.No. _____ A.R. _____ Cen.Meridian _____ Altitude _____

Sky cond. _____ Seeing _____ Clouds _____ Wind _____

Observatory type (circle one): roll off roof, roll off bldg., dome, none

TELESCOPE:

Inst. type _____ Mounting type _____

Clock drive? _____ Type of drive _____

Full aperture _____ Focal length _____ f/ _____

Aperture stop/type _____ Final f/ _____

Address: _____ Phone No. ()area code _____