

YEAR

OSNZ Nest Record Card

DATE		TIME	NO. EGGS	NO. YOUNG	BIRD ON	AGE OF YOUNG	REMARKS
DAY	MONTH						

1. RECORD FACTS ONLY: MAKE NO ESTIMATES OR GUESSES.
2. Use a separate card for EACH nesting attempt.
3. Record ALL nests found containing eggs or young, even if the information is incomplete. Put a ✓ in the appropriate column if the number of eggs or young is uncertain.
4. Time: Please use the 24 hour clock, eg 1830 not 6.30pm. Ignore NZST.
5. Bird on: Y = Yes, unknown sex, M = Male, F = Female, N = No, W = No, but eggs warm, C = No, eggs cold.
6. Age of young: Give age in days if known (eg 4d), or: e1 = eyes shut, e2 = eyes partly open, e3 = eyes open; wf0 = naked/downy, wf1 = wing feathers in pin (quills not open), wf2 = wing feathers sprouting, wf3 = wing 1/2 grown, wf4 = wing 3/4 grown, wf5 = well feathered.
7. Dates on which no major change was noted can be shown under Remarks.

OUTCOME OF NEST (mark with an X)

SUCCESS No. fledged _____

Young were:

11 Ready to leave when last seen

12 Seen leaving naturally

13 Seen leaving when approached

14 Near nest

15 Other

UNKNOWN 01 Evidence inconclusive 02 Observations not continued

FAILURE Notes:

NEST: 21 Gone 22 Deserted 23 Damaged 24 Fallen

EGGS: 31 Gone 32 Broken 33 Out of nest 34 Infertile/Added

YOUNG: 41 Gone 42 Injured 43 Dead in nest 44 Dead below nest

51 Other Notes:

OBSERVER _____

Obs. Code _____ Sp. Code _____

SPECIES _____

These two boxes for office use only.

Year _____ No. _____

LOCALITY _____ ALTITUDE _____ m

LATITUDE _____ ° _____ ' S ; LONGITUDE _____ ° _____ ' E / W

HABITAT (mark with an X)

01 Beech forest 02 Other native forest 03 Exotic forest 04 Scrub 05 Farmland

06 Tussockland 07 Alpine/Sub-alpine 08 Swamp/Marsh 09 Lake/Lagoon 10 Riverbed

11 Estuary 12 Sandy coast/Dunes 13 Rocky coast 14 Horticultural 15 Residential

SITE (mark with an X)

01 Live plant 02 Dead plant 03 On ground 04 In burrow 05 Cliff/Bank

06 Cave 07 Building 08 Bridge/Culvert 09 Nest box 10 Other

Notes: (eg tree species)

HEIGHT OF NEST ABOVE GROUND/ WATER _____ m HEIGHT OF NEST PLANT/ CLIFF/ STRUCTURE _____ m

HEIGHT OF TALLEST VEGETATION OVER NEST _____ m

GENERAL NOTES:

First Egg Laid _____

Last Egg Laid _____

First Young Hatched _____

Last Young Hatched _____

First Young Left Nest _____

Last Young Left Nest _____

Full Clutch Size _____

Number Hatched _____

Number Left Nest _____

Incubation Period _____

Nestling Period _____