OSNZ Nest Record Card

YEAR

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

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 ¼ grown, wf4 = wing ½ 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)

☐ UNKNOWN 01 ☐ Evidence inconclusive 02 ☐ Observations not continued

☐ 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

☐ FAILURE Notes:

NEST: 21 ☐ Gone 22 ☐ Deserted 23 ☐ Damaged 24 ☐ Fallen

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

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:

OBSERVER'S REFERENCE NO. REF. NOS OF OTHER NESTS OF SAME PAIR

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	