Annual Bluebird Report Form - Bluebirds Across Nebraska (BAN)
P.O. Box 67157 Lincoln NE 68506-7157

Year: _____

(Please Print Clearly)

Last Name	First Name	Street Address	
City/Town	County	State	Zip Code

Telephone: (____) _____ **In what county are your bluebird boxes located?*_____**
***If you had boxes in more than one county, please submit a separate form for each county.*

Is your trail located in a State Park or State Recreational Area? If so, which SP or SRA _____

Are you a member of Bluebirds Across Nebraska? _____
If not, would you like membership information? _____

Approximately how often did you check your boxes? _____
(i.e. once a week, every other week, every day, etc.)

How many bluebird boxes did you check? _____

How many nesting attempts did bluebirds have? _____
(A nesting attempt means a nest was completed and at least one egg laid - whether successful, abandoned, destroyed by predators. etc.)

How many successful broods of bluebirds? _____
(A brood is a single nesting where one or more bluebirds fledged)

Total number of bluebird eggs? _____

Total number of bluebird eggs hatched? _____

Total number of bluebirds fledged?* **_____**
(Bluebirds that successfully left the nest) ***** *Please indicate if the birds fledged were mountain bluebirds which are generally found in the western part of Nebraska.*

How many bluebird boxes did wrens: Try to use? _____ Successfully use? _____

How many bluebird boxes did house sparrows: Try to use? _____ Successfully use? _____

How many bluebird boxes did tree swallows: Try to use? _____ Successfully use? _____

How many tree swallows successfully fledged from your bluebird boxes? _____

What other birds successfully used your bluebird boxes?_____

***** *Please document any special comments, concerns, or problems on the back of this form.*****

Please return your completed form to BAN (address at top) no later than October 15th

Thank you!

BAN needs your input for continued success.
Please include any comments, concerns, or problems: