

COUNCIL FOR SCOTTISH ARCHAEOLOGY GRAVEYARD RECORDING FORM

1. GRAVEYARD DETAILS

NAME (S)

ADDRESS

POSTCODE

PARISH

LOCAL AUTHORITY AREA

2. GRID REFERENCE The centre of the graveyard is located at:

Grid ref. not known

3. NMRS NUMBER(S)

Graveyard not NMRS registered Don't know NMRS number

4. SITE STATUS Please tell us if any part of the graveyard is :

I) Listed Yes No Don't know

II) Scheduled Yes No Don't know

5. GRAVEYARD SITUATION is the graveyard found

In a major town or city?

In a small town or village setting?

By a small settlement, farm, croft or house?

Completely isolated from any settlement?

Other - state...

6. SURROUNDING LAND USE Please tick all that

apply (up to 100m):

Agriculture Amenity Housing Road

Seaside Woodland Fresh Water Industry

Other - state...

7. SITE TYPE AND LAYOUT

A. Site Type – Tick all boxes that apply, even if the church or other buildings no longer remain standing or have fallen out of use. Categories apply to examples of intramural, as well as outdoor, burials. If you tick more than one box below please give details about the graveyard's layout and history in Part C

- Graveyard connected to a church
- Graveyard connected to a chapel
- Graveyard connected to monastic site / religious house
- Graveyard associated with a cathedral
- Graveyard associated with another place of worship or faith group – state...
- Graveyard associated with an institution (e.g. school, hospital) – state...
- Municipal burial ground pre-1830 in date
- Public cemetery post-1830 in date
- Private family burial(s)
- Garden of remembrance
- Pet cemetery
- Other - state...

Part B: Graveyard Extensions and Zones Does the graveyard fall into distinct areas of ground that have a different history or use from one another?

No Yes – describe in Part C and mark them on your site sketch overleaf.

Part C: Further Details Can you tell us more about the history and chronology of the graveyard's layout? Please make sure you complete this section if more than one box was ticked in Part A. Use a continuation sheet if necessary.

7. SITE TYPE AND LAYOUT *continued* **Part D: Site Sketch**

I attach a separate plan of the graveyard

Please mark the position of boundary walls, entrances, extensions, buildings or other features noted in question 9, making sure that each feature is labelled (for burial enclosures please also note the name of the family who own it). If needed, use the continuation sheet on the back of this form.

8. GRAVEYARD SETTING & ASSOCIATED SITES Please describe anything which might be important about the graveyard's setting, including any features in the nearby landscape which might be connected to the site, for example, a coffin road, holy well, or perhaps another graveyard. Use a the continuation sheet if necessary.

9. GRAVEYARD FEATURES

Part A: Entrances and Enclosures

- i.** Is graveyard enclosed? No Yes - by a stone wall metal railings other - *state ...*
- ii.** How many entrances has the graveyard ?
- iii.** Is there any carvings or other decoration at graveyard entrance(s) or on the outside the boundary wall?
No Yes – please tell us where and describe and / or sketch what you see, use a continuation sheet if necessary.

Part B: Buildings, Structures and Other Features Tick features found in the graveyard, delete options as appropriate and note number of examples present. Give details of design, fittings and fixtures in Part C

	Number found		Number found
bee / charter bole <input type="checkbox"/>	mausoleum <input type="checkbox"/>
(detached) bell tower / cote <input type="checkbox"/>	mercat cross <input type="checkbox"/>
building (use unknown) <input type="checkbox"/>	morthouse <input type="checkbox"/>
burial aisle <input type="checkbox"/>	mortsafe <input type="checkbox"/>
burial enclosure <input type="checkbox"/>	mound <input type="checkbox"/>
burial vault <input type="checkbox"/>	mounting steps <input type="checkbox"/>
catacombs <input type="checkbox"/>	offertory house <input type="checkbox"/>
(ruined / roofless) church, chapel or tower <input type="checkbox"/>	ruin (former use unknown) <input type="checkbox"/>
church / chapel / other place of worship <input type="checkbox"/>	sanctuary cross / marker <input type="checkbox"/>
church hall <input type="checkbox"/>	standing stone / stone circle <input type="checkbox"/>
doocot <input type="checkbox"/>	sundial <input type="checkbox"/>
gatehouse <input type="checkbox"/>	war memorial <input type="checkbox"/>
hearse house <input type="checkbox"/>	watch tower / watch house <input type="checkbox"/>
hermitage / cell <input type="checkbox"/>	well <input type="checkbox"/>
jougs <input type="checkbox"/>	yew tree <input type="checkbox"/>
kirk session house <input type="checkbox"/>	Other <input type="checkbox"/> – state
lychgate <input type="checkbox"/>		

C. Details of the layout, design, fixtures and fittings of any buildings, structures or other interesting built or natural features in the graveyard. In the case of burial enclosures, vaults and mausoleums please note the family they belong to. use a continuation sheet if necessary. Please check that you have plotted and labelled all features on your site sketch (previous page).

D. Intramural Burials: Please indicate if

- There is no place of worship in the graveyard
- There are burials / commemoration inside a place of worship
- There is no evidence of burials / commemoration inside a place of worship
- You weren't able to check for burials / commemoration inside a place of worship
- Other – state...

10. GRAVESTONE DATE AND NUMBER Please tell us about the number and date of gravestones. If there is more than one graveyard zone (see question 7) please give details for each separate zone

- i. how many gravestones are found in the graveyard?
- ii. What is the date of earliest stone?
- iii. What is the date of the most recent stone?.....
- iv. When do when most stones appear to have been erected?.....

11. TYPES OF GRAVESTONE AND OTHER CARVED STONES

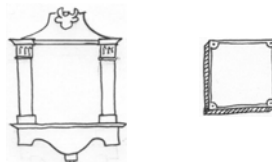
Please show which types / groups of designs are found in the graveyard, giving an indication of their numbers and dates.

Wall / Mural Monument



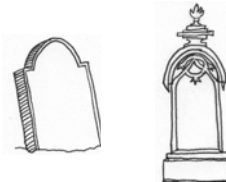
Total Found
(estimate)
Date - Tick all that apply:
Pre-C17 Pre-C17
C18th C18th

Wall / Mural Tablet



Total Found
(estimate)
Date - Tick all that apply:
Pre-C17 Pre-C17
C18th C18th

Headstone



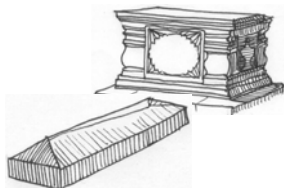
Total Found
(estimate)
Date - Tick all that apply:
Pre-C17 C19th
C18th Post C19

Grave Slab or Flat Stone



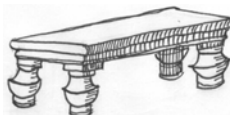
Total Found
(estimate)
Date - Tick all that apply:
Pre-C17 Pre-C17
C18th C18th

Chest Tomb or Low Coped Tomb



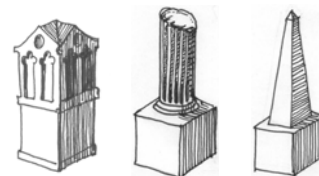
Total Found
(estimate)
Date - Tick all that apply:
Pre-C17 Pre-C17
C18th C18th

Table Tomb



Total Found
(estimate)
Date - Tick all that apply:
Pre-C17 C19th
C18th Post C19

Pedestal Tomb, Broken Column or Obelisk



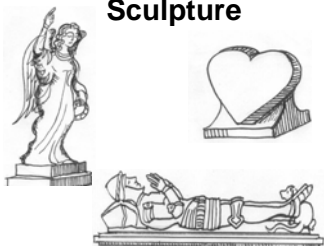
Total Found
(estimate)
Date - Tick all that apply:
Pre-C17 C19th
C18th Post C19

Freestanding Cross



Total Found
(estimate)
Date - Tick all that apply:
Pre-C17 Pre-C17
C18th C18th

Sculpture



Total Found
(estimate)
Date - Tick all that apply:
Pre-C17 C19th
C18th Post C19

Other Types of Gravestones / Carved Stones









Please describe, including details on design, number of examples found and, where possible, date. If needed, use the continuation sheet on the back of this form.

Please give **additional details** about any of the designs above. Use a continuation sheet if necessary

12. DECORATION AND CARVINGS

A Trade Symbols

please tick boxes to show symbols found

 HAMMER-MEN <input type="checkbox"/>	 FLESHERS <input type="checkbox"/>	 FARMERS <input type="checkbox"/>	 MILLERS <input type="checkbox"/>	 MALTMEN <input type="checkbox"/>
 WEAVERS <input type="checkbox"/>	 MARINERS <input type="checkbox"/>	 TAILORS <input type="checkbox"/>	 BARBERS <input type="checkbox"/>	 GARDENERS <input type="checkbox"/>
 BAKERS <input type="checkbox"/>	 GLOVERS <input type="checkbox"/>	 MERCHANTS <input type="checkbox"/>	 SLATERS <input type="checkbox"/>	 BLACKSMITHS <input type="checkbox"/>
 SHOEMAKERS <input type="checkbox"/>	 MASONS <input type="checkbox"/>	 WAULKMILLERS <input type="checkbox"/>	 GAMEKEEPERS <input type="checkbox"/>	 CARPENTERS <input type="checkbox"/>

Total number of gravestones with these carvings (estimated)

Other Trade Symbols please sketch / describe

B Mortality and Immortality Symbols

please tick boxes to show symbols found

 SKULL <input type="checkbox"/>	 SKELETON <input type="checkbox"/>	 HOURGLASS <input type="checkbox"/>	 COFFIN <input type="checkbox"/>	 BONES <input type="checkbox"/>	 SEXTON'S TOOLS <input type="checkbox"/>		
 SCYTHE & DART <input type="checkbox"/>	 BELL <input type="checkbox"/>	 CORPSE <input type="checkbox"/>	 WINGED SOUL <input type="checkbox"/>	 SNAKE <input type="checkbox"/>	 DOVE <input type="checkbox"/>	 HEART <input type="checkbox"/>	 SHELL <input type="checkbox"/>
 TORCH <input type="checkbox"/>	 URN <input type="checkbox"/>	 FLOWERS <input type="checkbox"/>	 FOLIAGE <input type="checkbox"/>	 CROSS <input type="checkbox"/>	 CROWN <input type="checkbox"/>	 WREATH <input type="checkbox"/>	 PALMS <input type="checkbox"/>
 CHERUB <input type="checkbox"/>	 ANGEL <input type="checkbox"/>	 HANDS <input type="checkbox"/>	 WEEPING WILLOW <input type="checkbox"/>	 GREENMAN <input type="checkbox"/>	 MOON <input type="checkbox"/>	 SUN <input type="checkbox"/>	

Total number of gravestones with these carvings (estimated)

Other Mortality / Immortality Symbols please sketch / describe

C: Portraiture please describe / sketch. Use a continuation sheet if necessary.

D: Other (e.g. religious scenes) please describe / sketch. Use a continuation sheet if necessary.

E: Heraldic Carvings please describe / sketch. Use a continuation sheet if necessary.

Total number of gravestones with these carvings (estimated)

Total number of gravestones with these carvings (estimated)

Total number of gravestones with these carvings (estimated)

13. INTERESTING OR UNUSUAL GRAVESTONES please tell us about any examples that stand out in the graveyard in some way or are connected to important or unusual events or people. If needed use the continuation sheet on the back of this form.

14: GRAVEYARD CONDITION Tick the appropriate box to show extent of graveyard affected and give further details in the space provided

	A: Is there any evidence of vandalism in the graveyard?	Details:
<input type="checkbox"/> No	<input type="checkbox"/> Yes - odd examples	<input type="checkbox"/> Yes - some areas (state)
	<input type="checkbox"/> Yes: across site	<input type="checkbox"/> Other (state)
	Details:	
	B: Is there any litter in the graveyard?	Details:
<input type="checkbox"/> no	<input type="checkbox"/> yes - odd examples	<input type="checkbox"/> yes - some areas (state)
	<input type="checkbox"/> yes: across site	<input type="checkbox"/> other (state)
	Details:	
	C: Is grass killer used near gravestones / other features?	Details:
<input type="checkbox"/> no	<input type="checkbox"/> yes - odd examples	<input type="checkbox"/> yes - some areas (state)
	<input type="checkbox"/> yes: across site	<input type="checkbox"/> other (state)
	Details:	
	D: Is turf removed from around gravestones / other features?	Details:
<input type="checkbox"/> no	<input type="checkbox"/> yes - odd examples	<input type="checkbox"/> yes - some areas (state)
	<input type="checkbox"/> yes: across site	<input type="checkbox"/> other (state)
	Details:	
	E: Have any gravestones / other features sunk or banks of soil built up around them?	Details:
<input type="checkbox"/> no	<input type="checkbox"/> yes - odd examples	<input type="checkbox"/> yes - some areas (state)
	<input type="checkbox"/> yes: across site	<input type="checkbox"/> other (state)
	Details:	
	F: Does the graveyard have a loose gravel surface ?	Details:
<input type="checkbox"/> no	<input type="checkbox"/> yes - odd examples	<input type="checkbox"/> yes - some areas (state)
	<input type="checkbox"/> yes: across site	<input type="checkbox"/> other (state)
	Details:	
	G: Is there any planting tended in the graveyard? (e.g. shrubs or flowerbeds)	Details:
<input type="checkbox"/> no	<input type="checkbox"/> yes - odd examples	<input type="checkbox"/> yes - some areas (state)
	<input type="checkbox"/> yes: across site	<input type="checkbox"/> other (state)
	Details:	
	H: Are any gravestones / other features overgrown by grass?	Details:
<input type="checkbox"/> no	<input type="checkbox"/> yes - odd examples	<input type="checkbox"/> yes - some areas (state)
	<input type="checkbox"/> yes: across site	<input type="checkbox"/> other (state)
	Details:	
	I: Are there problems with untended vegetation? (e.g. tree roots, samplings, ivy or plants growing out of gravestones)	Details:
<input type="checkbox"/> no	<input type="checkbox"/> yes - odd examples	<input type="checkbox"/> yes - some areas (state)
	<input type="checkbox"/> yes: across site	<input type="checkbox"/> other (state)
	Details:	
	J: Are any memorial inscriptions illegible?	Details
No <input type="checkbox"/>	Yes <input type="checkbox"/> Number of stones or % of site affected
	Details	
	K: Do any gravestones have their foundations visible?	Details
No <input type="checkbox"/>	Yes <input type="checkbox"/> Number of stones or % of site affected
	Details	
	L: Have any gravestones fallen over or been laid flat?	Details
No <input type="checkbox"/>	Yes <input type="checkbox"/> Number of stones or % of site affected
	Details	
	M: Are any gravestones broken?	Details
No <input type="checkbox"/>	Yes <input type="checkbox"/> Number of stones or % of site affected
	Details	
	N: Have gravestones, buildings, walls etc. been repaired?	Details
No <input type="checkbox"/>	Yes <input type="checkbox"/> Number of stones or % of site affected
	Details	
	O: Is there damage or deterioration of other features or structures?	Details
No <input type="checkbox"/>	Yes <input type="checkbox"/> Number of stones or % of site affected

P: Have gravestones or other features been cleared, tidied up or moved ?

No Yes Number of stones or % of site affected – give details

Q: Have any other events or problems that have affected the graveyard's condition ? No Yes Please give details, use a continuation sheet if necessary.

15. GRAVEYARD CARE & OWNERSHIP Please tell us who owns the graveyard, who is responsible for its maintenance (note these may not be the same) and if you know of any groups involved with the graveyard.

i Owner: *if different* **ii** Maintained by

Unknown

Unknown

iii Local groups involved with the graveyard :

Unknown

16. IS THE GRAVEYARD CURRENTLY USED FOR BURIALS? Please indicate if the graveyard:

Is in current use for burials

Has selected areas in current use for burials – please give details

Is closed for burials but still maintained

Is abandoned

Don't know whether the site is still in use for burials

Other – state...

17. IS THE GRAVEYARD OPEN TO THE PUBLIC?

i Please tell us how many people you saw at the graveyard during your survey

ii Please tell us more about these visitors (e.g. are they relatives of the deceased, local residents, family historians, tourists, anti-social users etc.). Use a continuation sheet if necessary.

18. ACCESS : PROBLEMS AND FACILITIES Please tell us what facilities exist for graveyard visitors and of any factors which might restrict the site's use by the public. Use a continuation sheet if necessary.

19. IS THE GRAVEYARD PROMOTED TO VISITORS ? Please tell us about any on-site interpretation boards, leaflets, guided tours, websites or other ways in which the graveyard may be presented to the public. Use a continuation sheet if necessary.

20. LOOKING AFTER THE GRAVEYARD We would like to know what you think the priorities should be in order to best care for the graveyard you have recorded.

Please pick **four** areas from the list below and rank them in order of importance (1 being the most important). If you think that any area of work listed below should not be undertaken at all please make cross next to it. Alternatively, if you don't think the graveyard should be cared for at all please tick this box and give your reasons why

- | | |
|--|---|
| • Looking after nature in the graveyard | • Keeping the graveyard neat and tidy |
| • Making unstable gravestones safe | • Ensuring the safety of visitors |
| • Preserving the gravestones | • Preserving specific gravestone(s) (<i>state below</i>) |
| • Preserving all other built features | • Preserving specific built feature(s) (<i>state below</i>) |
| • Developing role as an educational resource | • Developing the site as a visitor attraction |
| • Developing role as amenity / leisure resource | • Providing a suitable place for the bereaved |
| • More onsite information about the graveyard | • Making sure that the gravestones are recorded |
| • Other (<i>state</i>) | |
| • I don't think this graveyard should be cared for (state why below) <input type="checkbox"/> | |

Please state briefly any factors that influenced your selection of priorities above Use a continuation sheet if necessary.

21. RESEARCH & FIELD RECORDING Give details of any research or recording work you know of giving bibliographic details where possible. Please note any differences between these accounts and what you could see at the graveyard at the time of your visit. Use a continuation sheet if necessary.

22. SURVEY DETAILS

i Date of survey

ii Name of recorder

iii Contact details

iv How many miles do you live from the graveyard?

v Do you have any particular associations with the graveyard? (e.g. relatives buried there, attend local church, have completed other recording work at site etc.)

