

# 2021 Farm Application


## ANIMAL HOUSING AND SANITATION (H1-H7)

Which of the following fence types are used to contain animals on the property? Check all that apply.

- Barbed wire
- Barbless or twisted wire
- Chain link
- Electric tape/wire/braid
- Fiberglass post and rails
- Hog panels
- Natural Impenetrable Barrier (Thorny Hedge, Pond, etc.)
- Non-Climb/Woven Wire
- Pipe Corral
- Welded Wire
- Wood Post & Rails
- Tightlock game fence
- Hardware cloth
- Soft netting
- Solid barrier (concrete, concrete block, artificial rock, glass)
- Other \_\_\_\_\_

For any fencing that is made up of squares or diamonds, what size are the squares/diamonds? Check all that apply.

- 1"x1"
- 2"x2"
- 2"x3"
- 3"x3"
- 3"x4"
- 4"x4"
- 4"x6"
- 6"x6"
- Graduated-smaller squares at the bottom and larger at the top
- Other \_\_\_\_\_
- Not Applicable

 How high are the fences?

Equine \_\_\_\_\_


Ruminant \_\_\_\_\_

Suidae \_\_\_\_\_

Lagomorph \_\_\_\_\_

Ground Feeding Birds \_\_\_\_\_

Aquatic/Semi Aquatic Birds \_\_\_\_\_


 In addition to the fencing described above, is there perimeter fencing that completely encloses the property (may or may not include segments of pasture fencing)?

- Yes
- No


Which of the following fence types are used around the perimeter of the property? Check all that apply.

- Barbed wire
- Barbless or twisted wire

- Chain link
- Electric tape/wire/braid
- Fiberglass post and rails
- Field/cattle/goat fence
- Hog panels
- Natural Impenetrable Barrier (Thorny Hedge, Pond, etc.)
- Non-Climb/Woven Wire
- Pipe Corral
- Welded Wire
- Wood Post & Rails
- Other \_\_\_\_\_
- No Perimeter Fence

 If metal T-Posts are used, are they all capped?

- Yes
- No
- Not Applicable

 What type of predators (or nuisance animals) presents a risk to the animals at your sanctuary/rescue?


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 What type(s) of land/pasture/surface are the animals kept on for outdoor enclosures? Check all that apply.

	Grasses/Shrubs	Woodlands	Barren Soil (Dry lot)
Equine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ruminant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lagomorph	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Feeding Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aquatic/Semi Aquatic Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Wire Mesh	Mixture of Barren Soil/Grasses/Woodlands/Concrete	Concrete
Equine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ruminant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lagomorph	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Feeding Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aquatic/Semi Aquatic Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Mixture of Barren Soil/Grasses/Woodlands/Concrete: **What percentage of each? Please describe.**

Equine \_\_\_\_\_

Ruminant \_\_\_\_\_

Suidae \_\_\_\_\_

Lagomorph \_\_\_\_\_

Ground Feeding Birds \_\_\_\_\_


Aquatic/Semi Aquatic Birds \_\_\_\_\_

 If there are other land/pasture/surface areas the animals are kept on for outdoor enclosures, please describe.

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 Briefly describe your snow/ice mitigation protocol and how it minimizes fall risk and other safety concerns for residents.


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 If animals don't have natural or planted forage, how are their species specific foraging/browsing needs met?


Equine	_____
Ruminant	_____
Suidae	_____
Lagomorph	_____
Ground Feeding Birds	_____
Aquatic/Semi Aquatic Birds	_____

 For animals which are confined or have limited-access outdoor space for climbing/digging/foraging and water features/mud wallows as species appropriate, how are their exercise/enrichment needs met?


Equine	_____
Ruminant	_____
Suidae	_____
Lagomorph	_____
Ground Feeding Birds	_____
Aquatic/Semi Aquatic Birds	_____

 What species-appropriate climbing structures are available?


Ruminants	_____
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 What species-appropriate mud wallows are available?

Suidae	_____
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 What perching, resting, hiding or nesting structures (natural or man-made) are available to the birds, as species appropriate?


Ground Feeding Birds	_____
Aquatic/Semi Aquatic Birds	_____

 Is there appropriate substrate for birds to dust bathe, peck/scratch, and if species appropriate, water sources/features for bathing/swimming, and areas for flying? If not, how are these natural behaviors accommodated?


Ground Feeding Birds	_____
Aquatic/Semi Aquatic Birds	_____

 What means are in place to prevent escape/injury in these areas?


Ground Feeding Birds	_____
Aquatic/Semi Aquatic Birds	_____

 Does the facility utilize indoor enclosures, aviaries, or indoor stalls/pens? If yes, explain how these enclosures/stalls/pens are used (daily, only inclement weather, health, etc.).


Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 What type of substrate(s) are in indoor enclosures? What type(s) of bedding are used in indoor enclosures?


Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 Are any animals at the sanctuary in solitary housing, other than as a temporary measure (e.g., for medical reasons). If yes, please list the reasons for each.


Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 If no indoor enclosures, aviaries, or stalls/pens are used, how are sick or injured animals housed?


Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 Have you identified any toxic or harmful vegetation on the property? If yes, what is the policy for removal?


- Yes
- No

 If you have identified any toxic or harmful vegetation on the property, what is the policy for removal?


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 What type of shelter or shade do the animals have when in outdoor enclosures/spaces/aviaries? Describe how the animals are protected from inclement weather.


Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 Is there sufficient room for all animals housed in each outdoor enclosure/space/aviary to get into/under the shelter or shade if necessary, taking into consideration temperament and social structure of the individual animals kept within the enclosure/space?


Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 Does the rescue/sanctuary have cleaning and disinfection standard operating procedures?


Yes  
 No

 How are feed buckets, feeders, and water containers cleaned and disinfected? How often are feeding and water containers cleaned?


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 How are tools, implements and food storage containers cleaned?


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 How often are enclosure walls, furniture, caging and other surfaces cleaned?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 Explain briefly how animal waste is managed, including in indoor enclosures/stalls/pens/aviaries and outdoor spaces. How is bedding sanitation managed, and how is waste removed from the property or composted?


Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 Where are cleaning supplies stored?

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 Are all cleaning supplies and feed containers labeled?

Yes


No

 What type of lighting/electrical power is available in outdoor spaces in the event of emergencies?

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 What type of lighting/electrical power is available in indoor spaces in the event of emergencies?

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 What facilities or means are available for animals not able to tolerate temperatures above or below the normal (e.g., elderly, ill, young)?

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 If animals are housed indoors, how is temperature regulated (heat, cooling)? For indoor enclosures, what temperature range is maintained?

Equine \_\_\_\_\_


Ruminant \_\_\_\_\_

Suidae \_\_\_\_\_

Lagomorph \_\_\_\_\_

Ground Feeding Birds \_\_\_\_\_

Aquatic/Semi Aquatic Birds \_\_\_\_\_


 How are your indoor enclosures ventilated, particularly with respect to mitigating temperature and humidity?


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 NUTRITION REQUIREMENTS (N1 – N5)

 Which of the following sources of water do the animals have access to? Indicate the species for each.

Automatic waterer \_\_\_\_\_

Trough/Stock Tank \_\_\_\_\_

Bucket \_\_\_\_\_

Pond \_\_\_\_\_

River/creek/stream/spring \_\_\_\_\_

Other \_\_\_\_\_

Are multiple sources of water available for animals housed in groups?

Yes

No

Is water: Check all that apply.


Fresh and clean

Free of ice in cold weather


Shaded in warm climates

Positioned to minimize spoilage

Automatic devices checked daily to ensure water is available

 How is water kept free of ice in cold weather?


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 How often is water inspected and cleaned?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 If your water source isn't municipal, how often is your water tested?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 When was the last time potable water was tested for contaminants? What were the results?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Who is responsible for determining feeding protocol? Check all that apply.

Veterinarian

Executive Director


Animal Care Manager

Other, please specify \_\_\_\_\_

Are dietary protocols made available to personnel?

Yes

No

 Briefly describe your daily feeding routine for the majority of each animal grouping/species. Please include what you feed and how often.

Equine \_\_\_\_\_


Ruminant \_\_\_\_\_

Suidae \_\_\_\_\_


Lagomorph \_\_\_\_\_

Ground Feeding Birds \_\_\_\_\_

Aquatic/Semi Aquatic Birds \_\_\_\_\_

 Are special diets offered, where appropriate? (e.g., senior animals, overweight animals, etc.)


- Yes
- No

 Explain your re-feeding protocol for starving animals.

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 How is feed intake monitored so that each animal is ensured adequate access?


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 Explain any other components of a balanced healthy diet that you utilize (supplements, enrichment, salt/mineral block, etc.).

- Equine \_\_\_\_\_
- Ruminant \_\_\_\_\_
- Suidae \_\_\_\_\_
- Lagomorph \_\_\_\_\_
- Ground Feeding Birds \_\_\_\_\_
- Aquatic/Semi Aquatic Birds \_\_\_\_\_

 How are decisions made concerning diet increases and decreases?

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How do you store bags of feed? Check all that apply.


- In their bags
- In cans/containers
- Purchased in bulk
- Other, please specify \_\_\_\_\_

 How do you store unopened bags of feed (if applicable)?

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 Where do you store produce, if applicable?

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How is food stored? Check all that apply.


- Dry and clean
- Refrigerated as needed
- Separate from medications
- Separate from human food
- Dated, with any expired being discarded




 VETERINARY CARE (V1-V9)

 What is the full name of your primary veterinarian?


\_\_\_\_\_

 Is the veterinarian a member of your staff?


- Yes
- No

 If the veterinarian is a member of your staff, are they?


- Full-time
- Part-time

 Is your veterinarian available after hours?

- Yes
- No

 If your veterinarian is not available after hours, what is the back-up for emergencies?


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 If your veterinarian is not on-site, how often do they come to the facility?


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Who at your facility is providing veterinary or medical care? Check all that apply.

- Veterinarian
- Veterinary Technician
- Caregivers
- Other, please list: \_\_\_\_\_

 Please list which personnel are trained to serve in the case of emergency medical needs in the absence of a veterinarian. What type of training do they have?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 Where are medical procedures performed at the facility?


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 What kind of medical facilities are located on the premises?


- None
- Indoor or outdoor space designed to facilitate minor medical treatment
- Full animal treatment area (hospital)
- Other, please specify \_\_\_\_\_

 Are animal first aid supplies stocked/available on-site?

- Yes
- No

 How far is the nearest veterinary hospital?

\_\_\_\_\_


 To whom and how do staff or volunteers communicate medical concerns?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_


 Are there any people other than the veterinarian who performs surgical procedures?

Yes


No

 If you answered yes, under what circumstances?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 How are animals monitored on an ongoing basis or in the event of surgery, treatment, procedure, etc.?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 Do you have a written or informal preventative medicine protocol?

Written

Informal

No preventative medicine protocol


Who developed your preventative/routine medicine protocol? Check all that apply.

Veterinarian

Executive Director

Animal Care Manager

Other, please list: \_\_\_\_\_

 Who determines what vaccines are used and how often? Check all that apply.

	Veterinarian	Staff
Equine	<input type="checkbox"/>	<input type="checkbox"/>
Ruminant	<input type="checkbox"/>	<input type="checkbox"/>
Suidae	<input type="checkbox"/>	<input type="checkbox"/>
Lagomorph	<input type="checkbox"/>	<input type="checkbox"/>


Describe the types and frequency of vaccinations given to animals at the sanctuary.

Equine \_\_\_\_\_

Ruminant \_\_\_\_\_

Suidae \_\_\_\_\_

Lagomorph \_\_\_\_\_

 How is the parasite load of the animals at the facility determined and how often?

How its determined

How often

Equine

- Appearance of animals
- Vet examines fecal samples from random animals
- Vet examines fecal samples on all animals
- Facility performs their own examination of fecal samples from random animals
- Facility performs their own examination of fecal samples on all animals
- Fecals are not performed; animals are on continuous de-wormer or rotational de-wormer

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Ruminant

- Appearance of animals
- Vet examines fecal samples from random animals
- Vet examines fecal samples on all animals
- Facility performs their own examination of fecal samples from random animals
- Facility performs their own examination of fecal samples on all animals
- Fecals are not performed; animals are on continuous de-wormer or rotational de-wormer

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Suidae

- Appearance of animals
- Vet examines fecal samples from random animals
- Vet examines fecal samples on all animals
- Facility performs their own examination of fecal samples from random animals
- Facility performs their own examination of fecal samples on all animals
- Fecals are not performed; animals are on continuous de-wormer or rotational de-wormer

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Lagomorph

- Appearance of animals
- Vet examines fecal samples from random animals
- Vet examines fecal samples on all animals
- Facility performs their own examination of fecal samples from random animals
- Facility performs their own examination of fecal samples on all animals
- Fecals are not performed; animals are on continuous de-wormer or rotational de-wormer

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Ground Feeding Birds


- Appearance of animals
- Vet examines fecal samples from random animals
- Vet examines fecal samples on all animals
- Facility performs their own examination of fecal samples from random animals
- Facility performs their own examination of fecal samples on all animals
- Fecals are not performed; animals are on continuous de-wormer or rotational de-wormer

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Aquatic/Semi Aquatic Birds

- Appearance of animals
- Vet examines fecal samples from random animals
- Vet examines fecal samples on all animals
- Facility performs their own examination of fecal samples from random animals
- Facility performs their own examination of fecal samples on all animals
- Fecals are not performed; animals are on continuous de-wormer or rotational de-wormer

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 How often are de-wormers administered?

Equine

- Continuous
- 1X - 2X per year
- 3X - 4X per year
- 5X or more per year
- Dependent on fecal parasite load determination


Ruminant

- Continuous
- 1X - 2X per year
- 3X - 4X per year
- 5X or more per year
- Dependent on fecal parasite load determination

- Suidae
  - Continuous
  - 1X - 2X per year
  - 3X - 4X per year
  - 5X or more per year
  - Dependent on fecal parasite load determination
- Lagomorph
  - Continuous
  - 1X - 2X per year
  - 3X - 4X per year
  - 5X or more per year
  - Dependent on fecal parasite load determination
- Ground Feeding Birds
  - Continuous
  - 1X - 2X per year
  - 3X - 4X per year
  - 5X or more per year
  - Dependent on fecal parasite load determination
- Aquatic/Semi Aquatic Birds
  - Continuous
  - 1X - 2X per year
  - 3X - 4X per year
  - 5X or more per year
  - Dependent on fecal parasite load determination

 How often do animals receive hoof/nail care (i.e. trimming or shoeing)?

- Equine
  - Never, terrain provides natural grinding
  - As needed, by appearance of hooves/claws/nails
  - Other
- Ruminant
  - Never, terrain provides natural grinding
  - As needed, by appearance of hooves/claws/nails
  - Other
- Suidae
  - Never, terrain provides natural grinding
  - As needed, by appearance of hooves/claws/nails
  - Other
- Lagomorph
  - Never, terrain provides natural grinding
  - As needed, by appearance of hooves/claws/nails
  - Other
- Ground Feeding Birds
  - Never, terrain provides natural grinding
  - As needed, by appearance of hooves/claws/nails
  - Other
- Aquatic/Semi Aquatic Birds
  - Never, terrain provides natural grinding
  - As needed, by appearance of hooves/claws/nails
  - Other

 Other - please describe:

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 Who performs farrier work/hoof/nail care? Check all that apply.

	Professional Farrier	Staff	Veterinarian
Equine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ruminant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Suidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lagomorph	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Feeding Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aquatic/Semi Aquatic Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other			
Equine	<input type="checkbox"/>		
Ruminant	<input type="checkbox"/>		
Suidae	<input type="checkbox"/>		
Lagomorph	<input type="checkbox"/>		
Ground Feeding Birds	<input type="checkbox"/>		
Aquatic/Semi Aquatic Birds	<input type="checkbox"/>		

 Other - please describe:


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 How often are fiber animals sheared?


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Who shears residents? Check all that apply.


- Professional shearer
- Carestaff with professional shearing training
- Carestaff
- Other \_\_\_\_\_

 How often do animals receive a dental check-up?

Equine	_____
Ruminant	_____
Suidae	_____
Lagomorph	_____

 Do you have quarantine protocols and procedures?

- Yes, unwritten
- Yes, written
- No

 If your quarantine protocols and procedures are unwritten, please briefly describe.

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 Do you have a separate area for new arrivals?

- Yes, indoor only
- Yes, outdoor only
- Yes, indoor and outdoor areas


No

 If you do not have a separate area for new arrivals, is your quarantine done prior to arrival?

Yes

No

Other, please specify \_\_\_\_\_

 Do you have a separate area for sick or injured arrivals (separate to new arrival quarantine)?

Yes

No

 How is your veterinarian involved with the intake of new animals?

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Please check all of the items that are documented for each animal when applicable.

General information-age, breed, gender, microchip number, tattoo, bio, registration number, etc.

Individual/pair/flock veterinary record

Intake photo

Origin

Species-specific tests, such as Coggins, CAE, OPP, PRRS, etc.

Height/Weight/Body Condition Score

Individual Veterinary record including lab and diagnostic results

Preventative and routine treatments (de-working, vaccinations, dental, farrier, other)

Reproductive history, if known, including castration/spay date if applicable

Weight, current diet and any dietary special needs

Acquisition documents

Any records from previous situation


Intake paperwork

Behavioral and training assessment upon intake and behavioral/training objectives and plan

Photos documenting health improvement after intake


Current photo (at least annual or biannual)

Disposition paperwork (Adoption, Foster, Transfer to another sanctuary/rescue, Euthanasia, Death information if other than Euthanasia)

 Do you document any other items for the animals?

Yes


No

 Please describe:

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 Do you provide copies of medical, or other appropriate records for animals transferred to other facilities/foster homes or adopted?

Yes

No

 Where are treatment supplies and pharmaceuticals stored?

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 Do you maintain medications according to law?

Yes


No

 How often do you check expiration dates of medication?

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 Do you use expired drugs?

Yes

No

 If you use expired drugs, how do you determine if the drugs are safe?

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 Are any controlled substances kept on the premises?

Yes


No

 If controlled substances are kept on the premises, describe how they are secured to meet legal requirements (e.g., DEA lock up in the U.S.).

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 Briefly describe how you record the use of controlled substances.

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 How are controlled substances disposed of?

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 Is a refrigerator available to store medications which require refrigeration?

Yes

No

 What methods of contraception/prevention of breeding are used?

Equine \_\_\_\_\_

Ruminant \_\_\_\_\_

Suidae \_\_\_\_\_

Lagomorph \_\_\_\_\_

Ground Feeding Birds \_\_\_\_\_


Aquatic/Semi Aquatic Birds \_\_\_\_\_

 How do you manage egg laying/egg hatching at the rescue/sanctuary?


Ground Feeding Birds \_\_\_\_\_

Aquatic/Semi Aquatic Birds \_\_\_\_\_




 Do you have the facilities and expertise to care for a pregnant animal that has been admitted to the rescue/sanctuary?


Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_

 Have there been any births at the sanctuary?


- Yes
- No

 If there have been births at the sanctuary, please explain.


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 Have you identified potential zoonotic diseases at your facility?


- Yes
- No

 How are personnel made aware of the potential risk of zoonotic diseases at your facility?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 Are personnel informed when a zoonotic disease occurs at the sanctuary?

- Yes
- No

 Do you have a euthanasia policy?


- Yes, written
- Yes, unwritten
- No

 If no written euthanasia policy exists, please briefly describe your policy.


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Under what circumstances do you have a necropsy performed on deceased animals? Check all that apply.

- All deaths
- Unknown cause of death
- Suspected infectious/contagious disease
- Not conducted


 Are necropsies performed on-site?

- Yes
- No


 Where do you store deceased animals prior to necropsy/disposal?

- Dedicated freezer/refrigerator
- Shared freezer/refrigerator
- Not stored

 WELL-BEING AND HANDLING OF ANIMALS (W1-W7)

 Who evaluates new animals? Check all that apply.

	Professional trainer	Executive Director	Staff
Equine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ruminant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lagomorph	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Feeding Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aquatic/Semi Aquatic Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Volunteer(s)	Professional behaviorist/species expert	Veterinarian
Equine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ruminant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lagomorph	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Feeding Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aquatic/Semi Aquatic Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 For those people evaluating new animals what training have they had?

Professional trainer \_\_\_\_\_


Executive Director \_\_\_\_\_

Staff \_\_\_\_\_

Volunteer(s) \_\_\_\_\_

Professional behaviorist/species expert \_\_\_\_\_

Veterinarian \_\_\_\_\_

 Describe how new animals are evaluated for behavior and temperament?

Equine \_\_\_\_\_


Ruminant \_\_\_\_\_

Suidae \_\_\_\_\_

Lagomorph \_\_\_\_\_

Ground Feeding Birds \_\_\_\_\_

Aquatic/Semi Aquatic Birds \_\_\_\_\_

 How is behavior of individual animals and groups monitored and recorded?

Equine \_\_\_\_\_


Ruminant \_\_\_\_\_

Suidae \_\_\_\_\_

Lagomorph \_\_\_\_\_

Ground Feeding Birds \_\_\_\_\_

Aquatic/Semi Aquatic Birds \_\_\_\_\_

 Describe the type and frequency of enrichment activities you offer the animals

Equine \_\_\_\_\_

Ruminant \_\_\_\_\_

Suidae \_\_\_\_\_

Lagomorph \_\_\_\_\_

Ground Feeding Birds \_\_\_\_\_

Aquatic/Semi Aquatic Birds \_\_\_\_\_

 What types of positive reinforcement activities are done with the animals? Please describe.


	Reinforcement Used	Please Describe:
Basic ground training or training under saddle for equines	<input type="checkbox"/>	_____
Animal Assisted Therapeutic Program or Learning Programs	<input type="checkbox"/>	_____
Activities to provide additional enrichment	<input type="checkbox"/>	_____
Activities to reduce the need for chemical immobilization	<input type="checkbox"/>	_____
Activities to reduce stress during medical intervention	<input type="checkbox"/>	_____
Other	<input type="checkbox"/>	_____

How often are the animals getting reinforcement training? Check all that apply.

- Daily
- Multiple times a week
- Weekly
- Other \_\_\_\_\_

Who participates in the above activities with the animals? Check all that apply.


- Trainer
- Staff or key volunteers
- Public
- Clients of Animal Assisted Therapeutic Program or Learning Programs
- Other, please list: \_\_\_\_\_

 How do you determine the suitability of each animal for those activities?


\_\_\_\_\_

\_\_\_\_\_


\_\_\_\_\_

 What is your protocol for introducing new animals into existing herds/groups/flocks?


Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 Are there separate spaces(s) that can accommodate animal introductions, adopter/animal introductions, management of health issues or other reasons to separate animals?


Yes  
 No

 Explain and describe the separate spaces.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

 Are the animals provided with routine daily handling or grooming?

Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 How are animals restrained for routine care and vet care?


Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 Do you transport animals to or from your facility?

Yes  
 No


 Do you have your own transportation trailer?

Yes  
 No


 What type of vehicle/trailer do you use? Check all that apply.

	Bumper-pull trailer	Gooseneck trailer	Ramp entrance
Equine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ruminant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Step-up entrance	Livestock trailer	Horse trailer
Equine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ruminant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Commercial hauling service		
Equine	<input type="checkbox"/>		
Ruminant	<input type="checkbox"/>		
Suidae	<input type="checkbox"/>		

 Are carriers/cages used to transport animals? Check all that apply.

	Commercial pet carriers	Wire cages	Wooden boxes
Ruminant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suidae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lagomorph	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ground Feeding Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aquatic/Semi Aquatic Birds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other		
Ruminant	<input type="checkbox"/>		
Suidae	<input type="checkbox"/>		
Lagomorph	<input type="checkbox"/>		
Ground Feeding Birds	<input type="checkbox"/>		
Aquatic/Semi Aquatic Birds	<input type="checkbox"/>		

 What other carriers/cages do you use to transport animals?

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 Is the holding area of the transport vehicle/trailer climate controlled?

- Yes  
 No

 If not, how do you deal with extremes of temperature during transport?


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 If the trailer is owned by the rescue/sanctuary, when was the last time it underwent a comprehensive evaluation and maintenance by a trained individual, including floors, etc.?


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 Briefly describe your transportation procedure including work to prepare, in process and follow up (e.g. efforts to minimize stress, maintain welfare, abide by laws/regulations; send SOP, if written).

Equine \_\_\_\_\_  
Ruminant \_\_\_\_\_  
Suidae \_\_\_\_\_  
Lagomorph \_\_\_\_\_  
Ground Feeding Birds \_\_\_\_\_  
Aquatic/Semi Aquatic Birds \_\_\_\_\_

 Do you ensure transports are conducted in accordance with applicable regulations and laws?

- Yes
- No


 Do all appropriate records accompany transported animals?

- Yes
- No

What are the reasons that animals would be transported off of the property? Check all that apply.

- Medical and veterinary
- Adoption
- Foster
- Training
- Education
- Events
- Transfer to other facilities
- Other: \_\_\_\_\_

 RESCUE POLICIES

 Please describe your organization's rescue policy with regard to intake strategy, capacity for care, and legal considerations and regulations.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_