



HOME EVALUATION FORM

Print Name Visited: _____

Address: _____

Phone: _____ Email: _____

Volunteer Name Printed: _____

Volunteer Phone: _____ Volunteer Email: _____

Date of Home Visit: _____

How were you greeted? Warmly: _____ Excited: _____ Calmly: _____ Reserved: _____

Indifferent: _____ Irritated: _____

Which family members were present during your visit? Husband: _____ Wife: _____

Other Adults Living in the Home: _____ Children (how many & ages): _____

Is there a fenced yard? _____ Size: _____ Material: _____ Secure/Escape Proof?

If a pig or other pets currently reside:

Is there housing for weather protection? _____

Is there a pool to cool off in the summer? _____

In winter, how are pigs kept warm and free from wind/rain/snow? _____

Are there holes or weaknesses in the fence?

How do the pets interact with their owners?

Do other pets appear healthy, well cared for, clean, optimal body weight, spayed/neutered?

Are the premises clean and well maintained?

Other pets in the household, please list: _____

Where will the pig spend the majority of his/her time? _____

Where will the pig sleep? _____

Where will the pig stay when the family is not home? _____

Where will the pig eat meals? _____

How will the pig be separated from dogs or other pets? _____

Are all family members open to adopting a pig? _____

Is the family open to additional education? _____

Did you dislike any family members? Please explain: _____

Do you feel this family would be an appropriate home for an adopted pig? Why or Why Not?

Volunteer Signature _____ **Date:** _____