



*Sandhills Horse Rescue*  
PO Box 903  
Spring Lake, North Carolina 28390  
[www.SandhillsHorseRescueNC.com](http://www.SandhillsHorseRescueNC.com)  
[SandhillsHorseRescue@gmail.com](mailto:SandhillsHorseRescue@gmail.com)

### Foster Facility Evaluation

Date: \_\_\_\_\_

Evaluator's Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Potential Foster Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

#### Pasture:

Pasture(s)/Paddocks(s) description: (i.e. dirt, amount of grass, etc.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Type of fencing: \_\_\_\_\_

Number of strands/rails: \_\_\_\_\_ Height of fence: \_\_\_\_\_ Is the fencing in good repair?  YES  NO

How many acres are fenced for use by equines? \_\_\_\_\_ How many equines are on the property? \_\_\_\_\_

Is there debris, junk, equipment, building materials, trash, or excessive manure in fields?  YES  NO

If yes, describe: \_\_\_\_\_

#### Water:

How are the equines supplied with water? (please include size and number of water containers, if any)

In pasture: \_\_\_\_\_

In barn: \_\_\_\_\_

Is the water supply clean, fresh and free of algae?  YES  NO

#### Condition of Other Equines / Animals (if applicable):

Are the equines / animals in good physical condition?  YES  NO

Do the equines / animals appear to receive regular hoof / farrier care?  YES  NO

Do the equines / animals receive regular preventative care (i.e. vaccines, deworming, teeth floating, coggins test)?  YES  NO

Do the equines / animals have a good attitude/temperament?  YES  NO

Are the equines / animals friendly with the foster and other persons on the property?  YES  NO

Do the equines / animals seem afraid or head-shy?  YES  NO

#### Shelter

Will the fostered equine be provided a  RUN-IN SHED  STALL  BOTH

#### Please complete for Run-In Shed:

Size of shelter: \_\_\_\_\_ How many equines are currently sharing this run-in? \_\_\_\_\_

Is the shed in good repair?  YES  NO

If NO, please describe: \_\_\_\_\_

\_\_\_\_\_

How many sides does the run-in have? ONE TWO THREE FOUR

If FOUR sides, how many exits? \_\_\_\_\_

Does the ground appear to be well-drained (stay dry in all types of weather conditions)? YES NO

Is the shed free of manure and debris? YES NO

**Please complete for Stall:**

Size of stalls: \_\_\_\_\_ Number of stalls? \_\_\_\_\_

Number of equines using the stalls? \_\_\_\_\_ Size of equines sharing stalls (mini, draft, average, etc.): \_\_\_\_\_

Are stalls in good repair (safe door, no protruding nails, etc.)? YES NO

If NO, please describe: \_\_\_\_\_

Is there clean, dry bedding in the stalls? YES NO

Do the stalls look like they are cleaned regularly? YES NO

How many hours per day will the equine be stalled?

Of what material is the floor of the stall made?

If dirt, does the ground appear to be well-drained (stay dry in all types of weather conditions)? YES NO

Distance in inches between the stall floor and walls:

Are there any spaces where a equine could get a foot caught? YES NO

If YES, please describe:

Does the barn have sufficient natural and/or artificial lighting? YES NO

If NO, please describe:

**Feed:**

How often are the equines fed? \_\_\_\_\_ Are they fed together or separately? \_\_\_\_\_

How is the feed stored? \_\_\_\_\_

Is the feed free from rodents/insects: YES NO

**Potential Foster Information:**

Does the potential foster seem knowledgeable about equines in general? YES NO

Does the potential foster seem capable of fostering an equine with medical needs? YES NO

Does the potential foster seem capable of fostering an equine with training needs? YES NO

If yes, describe capability: \_\_\_\_\_

Did the potential foster seem open to advice, suggestions, and recommendations? YES NO

**General Impressions:**

What is your general impression of the facility? \_\_\_\_\_

What is your general impression of the potential foster and persons associated with the foster? \_\_\_\_\_

\*\*\*Use additional pages and attach them if necessary\*\*\*

\*\*\*If photos are obtained please contact a SHR Board of Directors member and send the photos by email if possible\*\*\*

Please email or mail this completed checklist to the address at the top of the form.