

SOUTHERN ARIZONA GOLDEN RETRIEVER RESCUE REPORT OF HOME VISIT TO POTENTIAL FOSTER/ADOPTER

Revised July 25, 2013

This home visit report is for both potential fosters and potential adopters. Please fill out the form completely with all pertinent information, then send it in. (See the submission instructions on the last page.)

There is room for comments in all sections, and the better you can describe the home and family, the better match SAGRR can make for just the right Golden for this family. Keep in mind that the Placement team does not know this family or anything about them except what you provide in this report, so you are their eyes and ears to help them "see" the adoption family via this report.

| EVALUATOR AND APPLICANT INFORMATION | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|--------------|------------------|-------|---------------|--|--|
| Date of Visit | _EVALUATOR | | PHONE | EMAIL | | | |
| Address Visited | City, Z | <u></u> | Cross Streets | | | | |
| Explain what a foster fa | ımily does. | | | | | | |
| FAMILY INTERESTED IN FOSTER ONLY ADOPT ONLY FOSTER AND ADOPT | | | | | • | | |
| HOMEOWNER STATUS | OWNS HOME RENTS OR LEASES HOME | | | | | | |
| | ases home, obtain copy of l oved until this document ho | • • • • | r large breed do | og; | | | |
| APPLICANT | APPLICANT EMAIL | | | | | | |
| PHONES: HOME | WORK | | | CELL | | | |
| OCCUPATION/EMPLOYE | ER | | | | | | |
| | | | | | | | |
| CO-APPLICANT EMAIL | | | | | | | |
| PHONES: HOME | WORK | WORK CEL | | CELL | | | |
| OCCUPATION/EMPLOYE | ER | | | | | | |
| LIST ALL NON-APPLICANT HOUSEHOLD MEMBERS, RELATIONSHIP TO APPLICANT, AND AGES OF MINORS (Relationship types are Spouse/Partner, Child (including grandchild), and Non-applicant Adult) | | | | | | | |
| Name | | Relationship | | | Age, if minor | | |
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| EXTERIOR OF PROPERTY | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| TYPE OF DWELLING: Single-family Home Duplex Condo or Townhouse | | | | | |
| ☐ Mobile or Manufactured Home ☐ Apartment | | | | | |
| DESCRIBE SURROUNDINGS (e.g., is home in subdivision, country, on golf course, isolated, etc.) | | | | | |
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| EXTERIOR : Is the exterior of the home and the landscape generally well-maintained)? | | | | | |
| Yes No Somewhat | | | | | |
| Is the yard reasonably clear of feces, trash or other objects (and hazardous plants) that might present a health problem to the Golden? Yes No | | | | | |
| Is there a fenced yard? | | | | | |
| FENCE: What type of fence Height:ft. If there are varying heights, provide the lowest height | | | | | |
| Type of gate: Self-latching Socked neither | | | | | |
| If neither, explain | | | | | |
| Are there any apparent holes or gaps in the fencing? | | | | | |
| If the yard is not fenced, describe the surrounding area adjacent to the yard: | | | | | |
| Will the dog always be supervised or on-leash in the unfenced yard? | | | | | |
| Describe type of yard (i.e., grass, rock, dirt, natural desert, etc.) | | | | | |
| | | | | | |
| POOL Is there a pool? | | | | | |
| Is it fenced? | | | | | |
| Is there a spa? | | | | | |
| If applicant is requesting a puppy, verify if the puppy could get through the fencing and if so, is applicant willing to put up chicken wire or other safety measure to safeguard small puppy? Yes No Not Applicable | | | | | |
| If pool or spa is unfenced, advise Applicant it is hard to keep some Goldens out of the water, and note their reaction. | | | | | |
| Comments on the exterior or landscaping: | | | | | |
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| INTERIOR HOME ENVIRONMENT | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------|--------------|--------------|--|--|--|--|
| Is the home generally well maintained? | Yes | ☐ No | | | | |
| Is the home generally clean and free of debris or clutter? | Yes | ☐ No | | | | |
| Are there stairs inside or leading into or outside the home? This may impact an older dog or one with mobility issues. | | □ No | | | | |
| Describe the flooring (i.e., slick tile, carpet, hardwood, etc.) | | | | | | |
| Is the kitchen or bath trash uncovered? | Yes | ☐ No | | | | |
| Are any toilet lids open? | Yes | ☐ No | | | | |
| Is there a dog door of sufficient size for a large golden? | Yes | ☐ No | | | | |
| If not, are there any plans to install a dog door? | Yes | ☐ No | | | | |
| Look for any plants, fragile items at Golden tail level, shoes, toys, etc. that may be an issue and discuss with family. | | | | | | |
| While the family is home, where in the home will the Golde | en be allowe | d? | | | | |
| Where will the Golden sleep? | | | | | | |
| Will the Golden be allowed on furniture, beds? | Yes | ☐ No | | | | |
| When the family is gone, where will the Golden be? | | | | | | |
| Does the family use a crate? | Yes | ☐ No | | | | |
| If so, for what purposes / when / how long will the | Golden be ir | n the crate? | | | | |
| If not, what is the applicant's view on crating? | | | | | | |
| Are they willing to use other ways of containing a dog (e.g., baby gates) if they do not want to crate train? | | | | | | |
| | Yes | ☐ No | | | | |
| Comments on Interior | | | | | | |
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PET CARE AND INTERACTIONS How long will the Golden be left alone on a typical day? hours Who will be the primary care giver? Discuss that we do not allow dogs to be left outside when no one is home, or all day. Are there any other dogs in this home? Yes No Describe all dogs, listing breed, age, sex, and any specific information that might affect a SAGRR Golden: Are any of the resident dogs unaltered? If so, explain below Yes No Are there any cats in the home? Yes No If yes, list age and gender of each: Is family aware that cat food and litter box should be kept out of the Golden's reach? Yes No Are the cats used to dogs? Yes No Are there any other pets? Yes No If yes, please explain what type and where they are kept Are there any livestock? Yes No Are there any dogs that visit on a frequent basis? Yes No Did you take a Golden with you on this visit? Yes How did the family interact with your Golden? How did the resident dogs/cats interact with your Golden? How did the family interact with the resident dogs/cats? Yes No If yes, explain their interaction with your dog or the resident dog(s): Are there children in the home? Where will the dog eat? Where will the water bowl be located? What food will the family feed the Golden? _ Please discuss quality food and leave the "How to rate your dog's food" handout with them if appropriate. Explain that if there will be more than one dog, we recommend feeding them separately, at least for the first few weeks. How did they react to this recommendation? Please list all the ways the family will exercise the Golden. Additional comments on Pet Care and Interactions:

| THE GOLDEN FOR YOU | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---------|-------|--|--|--|
| Has the family owned a Golden previously? | | | | | | |
| Do they understand that many Goldens are velcro-type dogs and want to be where their people are? | | | | | | |
| Do they understand the shedding of Goldens and need for frequent brushing and grooming, vacuuming and sweeping? | | | | | | |
| ☐ Yes ☐ No | | | | | | |
| What type of Golden does the family prefer? | | | | | | |
| ☐ MALE ☐ FEMALE ☐ NO PREFERENCE | | | | | | |
| AGE RANGE PREFERRED | | | | | | |
| What are their expectations for the SAGRR Golden? | | | | | | |
| ☐ COMPANION ☐ HUNTING ☐ HIKING ☐ SWIMMING ☐ AGILITY | | AGILITY | | | | |
| ☐ CHILD'S COMPANION ☐ OBEDIENCE or RALLY ☐ THERAPY DOG ☐ SERVICE DOG | | | | | | |
| ☐ DOG'S COMPANION ☐ OTHER (explain) | | | | | | |
| What Activity Level? | | | | | | |
| Would the family consider a bonded pair? | Yes | ☐ No | Maybe | | | |
| Is the family willing to adopt a Golden with these conditions? | | | | | | |
| minor health problems? | | | | | | |
| (mild valley fever, thyroid, allergies, arthritis etc.) | Yes | ☐ No | Maybe | | | |
| major health issues? | Yes | ☐ No | Maybe | | | |
| special needs that are treatable? | Yes | ☐ No | Maybe | | | |
| cancer? | Yes | ☐ No | Maybe | | | |
| not house trained? | Yes | ☐ No | Maybe | | | |
| Comments on The Golden for You: | | | | | | |
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| TRAINING | FOR YOUR | GOLDEN | | | | |
| Please discuss that it is always advisable to take any age Golden to training/CGC/obedience classes as part of the bonding experience. Also, advise family that some Goldens really need training for a successful placement. | | | | | | |
| If SAGRR recommends training, is the family willing to use a trainer we recommend? | | | | | | |
| Is the family willing to crate train if recommended by SAGRR? | | | ☐ No | | | |
| Does the family understand that there is an adjustment period for most dogs, and it will be a few weeks or longer for the dog to settle into their home? Yes No | | | ☐ No | | | |

| FEE STRUCTURE FOR YOUR PERFECT GOLDEN | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| Did you review the fee structure with the family and explain that they will be paying the adoption fee, at the time the dog is delivered to them? | | | | | |
| \$300 O-UP TO 3 YEARS OLD | | | | | |
| \$250 3- UP TO 8 YEARS OLD | | | | | |
| \$150 OVER 8 YEARS OLD | | | | | |
| Let the family know that fees for special needs dogs are determined on a case by case basis. | | | | | |
| If family is interested in a pair, did you explain pair pricing (second dog is 1/2 price)? | | | | | |
| MISCELLANEOUS | | | | | |
| List any persons in the home with special needs that should be considered when placing a Golden in this home. | | | | | |
| Does the age and activity level of the dog requested appear appropriate for the family? Yes No | | | | | |
| If not, what age and activity level dog would you recommend for this family? | | | | | |
| Did you advise them of your recommendation for a different age/activity level dog? Please list any physical limitations that should be considered when placing a Golden in this home (e.g., the applicant weighs 80 pounds and would not be able to control a 100-pound untrained Golden) | | | | | |
| Does the family have a vehicle appropriate for a Golden? | | | | | |
| Please discuss and leave a copy of "What's Next." | | | | | |
| SUMMARY | | | | | |
| DO YOU RECOMMEND THAT SAGRR APPROVE THIS HOME? | | | | | |
| WOULD YOU LEAVE YOUR DOG IN THIS HOME? | | | | | |
| If you answered NO to either of the above, you must comment below. | | | | | |
| COMMENTS ON TRAINING, FEES, MISCELLANEOUS, OR IN GENERAL: | | | | | |
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IMPORTANT: Please save the completed form as a PDF on your computer for your records and as a backup.

In most cases you can simply **click the button below**. This will open an email addressed to <u>GHET@sagrr.org</u> with this form already attached. Please include a brief summary in the body of the email so Placement can quickly ascertain if this family is a possibility for a given dog. Then just send the email.

SAVE AND SUBMIT YOUR REPORT