

Animal Care and Housing Form for Colorado FFA Livestock Projects

It is the responsibility of every FFA member to ensure that proper care is taken of their animal(s) according to acceptable methods of good animal husbandry, as set forth by Colorado FFA and the Colorado Department of Agriculture. A healthy animal requires sufficient food, water, shelter, and appropriate health care. Cruel and inhumane training methods are prohibited in the Colorado FFA Program and will not be tolerated. Specific animal husbandry guidelines and humane training methods are provided in the appropriate FFA manual. It is necessary for the local FFA Chapter/Advisor to know the location of all FFA livestock/horse projects.

The Colorado FFA current project recommendation for primary care states that "FFA members will provide primary and continuous care of their project animals." **Primary care is defined as the FFA member making the decisions for and/or providing the care, handling, and training of their animal project a majority of the time.** Primary care exemption must be approved by the designated local representative body comprised of at least one FFA Advisor and other committee representatives as appointed by the FFA Advisor. The local FFA Advisor will determine a one-step appeal process if request is denied.

Each situation for exemption of primary care will be evaluated within the exhibitor's county by an appropriate review body. An approval or disapproval of the situation will be communicated to the participant(s) in writing. An appeal may be submitted through established grievance channels established in each county. FFA members and guardians acknowledge that approval of facilities and animal welfare checks may be conducted at anytime by the local FFA Advisor.

Submission of this animal care document is required by all FFA animal project participants each FFA year. Please check the box for each species you will be enrolled in this year. Sign and return this form to the local FFA Advisor as a commitment to the above guidelines.

Beef Cattle Dairy Cattle Goat Horse Llama Poultry Sheep Swine
 Dog Rabbit Other _____ *Please check all that apply*

Date: _____ FFA Chapter: _____

Exhibitor Name: _____

Physical Address: _____

City, State, and Zip Code: _____

Telephone/cell phone number: _____

Email Address: _____

Optional Information: Premises Registration Number with NAIS: _____

This section is for animals housed at your home

1. Will **all** of your animals be housed at your **home location**?
 Yes No

If your answer is No, please answer the following questions on page 2 and list the animal(s) not housed at your home location and submit to your FFA Advisor for approval. I grant the FFA Advisor permission to check on the FFA member's animals while they are housed on my property provided advance notice of such visits are given.

If your answer is Yes, please sign below.

I hereby certify that I have read the above information and will comply with the rules set forth above.

FFA Member's Signature

Parents/Guardian's Signature

This section for animals NOT housed at your home

2. List the particular circumstances that prevent you from having your project animals(s) housed at your primary residence.

3. Please indicate where (including address) each animal will be housed and the landlord/caretaker of the residence.
(Horse projects only: Δ Check this box if your horse(s) is being boarded and supply the following information.)

Landlord/Caretaker Name: _____

Physical Address: _____

City, State, and Zip Code: _____

Telephone/cell phone number: _____

Optional Information: Premises Registration Number with NAIS: _____

4. How do you plan to care for the project animal(s) not located at your primary residence? What arrangements have you made for traveling to and from the non-primary residence to care for your animal(s)?

5. If you will not be providing primary care for your project animal(s) during the entire ownership period, please explain who will be providing primary care, when they will be caring for the project animal, and why you are unable to provide primary care for the project animal through the ownership period.

6. What FFA shows do you plan to participate in? You will be under the same primary care requirements at all times. Please list the shows below:

As the landlord/caretaker of the property listed above, I acknowledge the FFA program's intent is educational; as such I will encourage and require the FFA member to be extensively and continuously involved in the care of their animals housed at my property. If deemed necessary by the FFA Advisor, I grant the FFA Advisor permission to check on the FFA member's animals while they are housed on my property provided advance notice of such visits are given.

Landlord/Caretaker's Signature _____
Date

I hereby certify that the above information is truthful and accurate.

FFA Member's Signature

Parents/Guardian's Signature

*Your request for Animal Care Exemption has been:

Approved

Denied

FFA Advisor's Signature

Date