

**Enrichment Evaluation for Single Animal: Behavioral Goal and Duration of Use**

Date: \_\_\_\_\_ Enrichment Item: \_\_\_\_\_ Observer: \_\_\_\_\_

Animal: \_\_\_\_\_ Species: \_\_\_\_\_

Number of times offered in the past:  1<sup>st</sup> use  1-10 times  11-20 times  >20 times

Time enrichment was given: \_\_\_\_\_  AM  PM Time of observation: \_\_\_\_\_  AM  PM

How long did you observe the animal with enrichment? \_\_\_\_\_ Minutes

Behavioral Goal (check all that apply)	Did the behavior occur?	If Yes, for how long?	How long after enrichment was offered?
<input type="checkbox"/> Foraging	<input type="checkbox"/> Yes <input type="checkbox"/> No	Minutes	Minutes
<input type="checkbox"/> Sensory	<input type="checkbox"/> Yes <input type="checkbox"/> No	Minutes	Minutes
<input type="checkbox"/> Social	<input type="checkbox"/> Yes <input type="checkbox"/> No	Minutes	Minutes
<input type="checkbox"/> Manipulation	<input type="checkbox"/> Yes <input type="checkbox"/> No	Minutes	Minutes
<input type="checkbox"/> Other:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Minutes	Minutes

Specific behavioral goal (e.g. spend x amount of time digging for food): \_\_\_\_\_

Does the goal include decreasing the frequency of an undesirable behavior?  Yes  No

If yes, what behavior? \_\_\_\_\_

When does it typically occur? \_\_\_\_\_ For how long? \_\_\_\_\_

Did the behavior occur?  Yes  No If yes, for how many minutes? \_\_\_\_\_

Was there a food element?  Yes  No If yes, what food? \_\_\_\_\_

How quickly was the food consumed?

- |  |   |
|--|---|
| <input type="checkbox"/> <1 minute     | <input type="checkbox"/> >30 minutes                          |
| <input type="checkbox"/> 1-5 minutes   | <input type="checkbox"/> > 1 hour                             |
| <input type="checkbox"/> 6-10 minutes  | <input type="checkbox"/> Food remaining at end of observation |
| <input type="checkbox"/> 11-15 minutes | <input type="checkbox"/> Other _____                          |
| <input type="checkbox"/> 16-30 minutes |   |

Did the animal continue interacting with the enrichment after the food was gone?

Yes  No  Don't know  N/A Comments:

After the initial observation, did the animal return to use the item later?

Yes  No  Don't know  N/A Comments:

If you were not able to observe the animal(s) interacting with the enrichment, do you have evidence that they interacted with it at all?  Yes  No If yes, please describe:

Was other enrichment offered at the same time?  Yes  No  Don't know

If yes, did the animal appear to show any preference for a particular item?

Yes (List item \_\_\_\_\_)  No  Don't know Comments:

Do you feel that the goal for this enrichment was met?  Yes  No  Don't know

Why?

Additional comments: