## **Hydroponic Farm Visit Evaluation Sheet**

Farm Name:					
Visit Date:					
Evaluator Name:					
Evaluation Criteria					
Criteria	Excellent	Good	Average	Poor	Comments
Facility Cleanliness	C	О	O	О	
Equipment Condition	C	O	0	С	
Crop Health	C	0	0	0	
Staff Knowledge	0	0	0	0	
Safety Measures	0	0	O	O	
Water/Nutrient System	0	0	C	O	
Overall Impression					
Suggestions/Notes					