

Dog's/Cat's Name: _____ Breed: _____ Color: _____ Age _____ Sex: _ _____ Foster Name: _____
---

# Dog/Cat Adoption Application

PLEASE PRINT CLEARLY

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

Spouse/Roomate: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Occupation: \_\_\_\_\_ Spouse's Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ Spouse's Employer: \_\_\_\_\_

**PERSONAL REFERENCE**

**VETERINARIAN**

Name: _____	Name: _____
Phone: _____	Phone: _____

1. Do you live in a: House\_\_ Condo\_\_ Apartment\_\_ Mobile Home\_\_ Military\_\_ Other \_\_\_\_\_
2. How long have you lived there? \_\_\_\_\_ Years \_\_\_\_\_ Months  
 If less than 2 years, please give previous address \_\_\_\_\_  
 How long did you live in previous place? \_\_\_\_\_
3. Do you? **Rent Own**
4. If yes do you have your landlord's permission to have a dog/cat? **Yes No**
5. May we contact your landlord? **Yes No** Name: \_\_\_\_\_ Phone: \_\_\_\_\_
6. Do you have a veterinarian? **Yes No** Name: \_\_\_\_\_
7. Are you willing to provide adequate medical care if this dog/cat should become sick/injured? **Yes No**
8. Healthy dogs/cats require annual vaccinations and routine medical care. What would you estimate the cost to be per year? \_\_\_\_\_
9. Dogs/Cats can live longer than 15 years and their care may amount to over \$400.00 per year. Are you prepared to accept this kind of responsibility for his/her entire life? **Yes No**
10. Would you object to an inspection of your home by a representative? **Yes No**
11. Do you plan to license this dog? **Yes No**
12. Are you willing to attend obedience classes? **Yes No**
13. Have you inquired about classes? **Yes No** Where? \_\_\_\_\_
14. How many hours a day will this dog/cat be left alone? \_\_\_\_\_
15. Where will he/she be kept during this time? \_\_\_\_\_
16. What kind of outdoor shelter is available for this dog? \_\_\_\_\_
17. Is anyone in the household allergic to animals? **Yes No** If yes, are they on medication to control the allergies? **Yes No**

18. Have you ever owned a cat or dog before? Yes No If yes, what happened to them? (If deceased please state cause of death and how long ago) \_\_\_\_\_

19. Do you currently own any animals? Yes No Number of Dogs \_\_\_\_\_ Number of Cats \_\_\_\_\_

19A. Give Breed, Sex, and Age \_\_\_\_\_

20. Have they all been spayed/neutered? Yes No

21. Are your other dogs licensed? Yes No

22. When were they last vaccinated? \_\_\_\_\_

23. Do you have a swimming pool? Yes No If yes, how is it fenced/covered? \_\_\_\_\_

24. Do you have a fenced yard? Yes No If yes, how high is the fence? \_\_\_\_\_ Feet

What type? \_\_\_\_\_

25. Do you have children at home? Yes No If yes, what are their ages? \_\_\_\_\_

26. On the first night home where will the dog/cat sleep? (Please be specific) \_\_\_\_\_

27. Who will be responsible for feeding, grooming and training your new pet? \_\_\_\_\_

28. Dogs left alone frequently dig, chew and bark. How do you plan to deal with these potential problems? \_\_\_\_\_

29. How soon after the dog arrives home will it be left alone? \_\_\_\_\_

30. How often do you travel? \_\_\_\_\_

31. How do you plan to provide for the dog when you are out of town? \_\_\_\_\_

32. What will happen to the dog/cat if you move? Locally? \_\_\_\_\_

Out of state? \_\_\_\_\_ Over seas? \_\_\_\_\_

33. Under what circumstances would you not keep this dog/cat? Divorce \_\_\_ Move \_\_\_ New Baby \_\_\_ New

Job \_\_\_ Illness \_\_\_ Training issues \_\_\_ Other \_\_\_\_\_

34. Why do you want a dog/cat? \_\_\_\_\_

35. If applicable, why do you want a puppy? \_\_\_\_\_

36. Why have you chosen this dog/cat? \_\_\_\_\_

37. Describe your experience grooming a small dog. \_\_\_\_\_

38. How will the grooming needs of this dog be met? \_\_\_\_\_

38. What provisions would you make for this dog/cat if you were unable to care for her any longer? \_\_\_\_\_

39. Are you willing to re-house train this dog during the transition period in your home? Yes \_\_\_\_\_ No \_\_\_\_\_

We cannot guarantee a dog is 100% house trained. Most have begun house training in their foster homes; however, ALL dogs will have to be re-trained to some extent at their adoptive homes, due to a new sleeping and feeding routine.

39. Describe your previous experience training a dog? \_\_\_\_\_

40. Describe how dog will get exercise \_\_\_\_\_

41. What happens if the dog will bond with only one member of the family? \_\_\_\_\_

**I CERTIFY THAT THE ABOVE INFORMATION IS TRUE, AND THAT ANY FALSE INFORMATION MAY RESULT IN NULLIFYING THE ADOPTION.**

**I UNDERSTAND THAT FILLING OUT THIS APPLICATION DOES NOT ENSURE THAT I WILL BE SELECTED TO ADOPT THIS DOG/CAT.**

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