

## APPLICATION FOR ADOPTION

**APPLICATION INFORMATION:**

Date of Application: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

City, State Zip: \_\_\_\_\_ Referred by: \_\_\_\_\_

HOUSEHOLD MAKEUP: Provide the following information for all (full or part-time) members of your household.

Name	Relationship to Applicant	Age	Wants a dog?	Home FT or Work Schedule

List all pets that are a part of your household.

Name	Type/Breed	Age	Indoor/Outdoor	M/F	Spayed/Neutered

**PREFERENCES OF ADOPTIVE FAMILY:**

What breed or breeds of dogs are you looking for? \_\_\_\_\_

Male or Female: \_\_\_\_\_ Color: \_\_\_\_\_ Age: \_\_\_\_\_

Show Prospect: \_\_\_\_\_ Pet Only: \_\_\_\_\_ Either: \_\_\_\_\_

Timing – When would you like to add a dog to your family? \_\_\_\_\_

If there is not a dog available, would you like to be placed on a waiting list? Yes \_\_\_ No \_\_\_

Any other preferences? \_\_\_\_\_

**ENVIRONMENT:**

Will the dog be primarily an indoor or outdoor dog? \_\_\_\_\_

On average, how many hours will this dog be alone during the day? \_\_\_\_\_

How will this dog be confined outdoors (i.e. fenced yard, kennel cable run, tether)? What is the size of the area?  
\_\_\_\_\_

Do you have an in ground or above ground swimming pool? Yes \_\_\_ No \_\_\_

If yes, is it fenced separately from the rest of the yard? Yes \_\_\_ No \_\_\_

Once trained, How and where will this dog be confined indoors when no one is home (i.e.crate, gates, doors, none)? What is the size of the area?  
\_\_\_\_\_

Once trained, how and where will this dog be confined at night (i.e. crated, gates, doors, none)? What is the size of the area?  
\_\_\_\_\_

**PRIMARY RESPONSIBILITIES:** Who will be responsible for the following?

Feeding: \_\_\_\_\_

Grooming: (combing, brushing, nails, teeth, clipping): \_\_\_\_\_

Letting in and out (potty breaks): \_\_\_\_\_

Taking for walks: \_\_\_\_\_

Cleaning up exercise area and how often: \_\_\_\_\_

House training: \_\_\_\_\_

General Training (puppy classes, obedience, general behavior): \_\_\_\_\_

**MISCELLANEOUS:**

How did you become introduced to this breed and what characteristics do you find appealing?  
\_\_\_\_\_

Please list the dogs you have owned in the past.

Breed of Dog	Owned from date to date	Age of Dog	What Happened

List any type of training in which you have ever participated (i.e. puppy class, obedience, agility, flyball, none).  
\_\_\_\_\_

**REFERENCES:** (Veterinarians, dog training instructors, friends, relatives)

Name	Relationships	Know for how long	Telephone

Other comments or information:

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_