



ADOPT-A-PET DOG ADOPTION GUIDELINES

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ALL PROSPECTIVE ADOPTERS MUST:

- * Be 21 years of age and have a valid ID with a verifiable current permanent address and verifiable phone number.
- * Ensure that the head of household and all other adults living in the household have consented to the adoption.
- * Bring all children and family members to meet the dog and Adopt-A-Pet representative before the adoption.
- * Have the financial ability to pay the adoption fee and ongoing expenses to care for dog, including routine and emergency veterinary care, grooming, and training.
- * Make a commitment to properly and humanely obedience train the dog, enrolling the dog in classes or hiring a professional trainer if necessary to address specific behavior problems or issues.
- * Ensure that dogs are allowed in rented housing. Renters must show copy of lease or other proof from landlord that the dog is allowed.
- * Fill out the Adoption Application, and understand that the application has to be approved and that the approval process may take 24-48 hrs. or longer. We know you're anxious to adopt your new pet, but to ensure a good match it may take a few days to process your application. Please be patient – we want to make sure that you and your new pet are compatible and will have many years together!

HOW TO START THE ADOPTION PROCESS:

- 1) If you have already spoken to an Adoption Screener and were given a direct fax number to send your application to, please follow those instructions.
- OR
- 2) If you have not spoken to an Adoption Screener yet, then fill out this Application and fax to 866-648-2603
 - 3) An Adoption Screener will contact you for a phone interview or follow-up.

PLEASE READ CAREFULLY AND MAKE SURE

THE APPLICATION IS FILLED OUT LEGIBLY, IN DARK PEN OR TYPED, AND IN ITS ENTIRETY.

INCOMPLETE OR ILLEGIBLE APPLICATIONS WILL NOT BE CONSIDERED

IMPORTANT NOTE: PLEASE REALIZE THERE MAY BE APPLICATIONS ALREADY PENDING ON THE DOG OR PUPPY THAT YOU'VE SET YOUR HEART ON. APPLICATIONS ARE GENERALLY CONSIDERED ON A FIRST-COME FIRST-SERVE BASIS, BUT IN THE EVENT THERE ARE MULTIPLE APPLICATIONS ON THE SAME ANIMAL WE RESERVE THE RIGHT TO SELECT THE HOME THAT WE FEEL BEST SUITS THAT PARTICULAR ANIMAL.

THIS SECTION FOR OFFICE USE ONLY

Screener: _____ Date: _____

Results: Did not Adopt OR Adopt Dog's name: _____ Dog's ID #: _____

Thank you for taking the time to complete this questionnaire. Your answers will permit us to more effectively meet your needs and the needs of our dogs. Our goal is to match each adopter with the dog that will best fit into his/her lifestyle to ensure the dog's best chance at a forever home. Please understand that our first obligation is to the welfare of our animals. It is our responsibility to find **permanent** loving homes for each of them. Therefore, we have adoption guidelines in place and we reserve the right to deny any adoption we feel is unsuitable. If your application is preliminarily approved, you will be called to arrange to meet the dog you're interested in or to pick up the dog that you've already met and decided on. Final approval rests with the foster parent. Upon picking up the dog, you will be expected to bring with you. **(please initial each item as read and understood):**

- ____ an appropriately sized collar with attached ID tag showing your address and phone number
- ____ an appropriately sized choke chain, prong collar, harness or gentle leader as specified for dog
- ____ a leash
- ____ personal picture ID (such as a driver's license) and ID showing your current address
- ____ cash or check for adoption fee. We do not take credit cards

Please check appropriate box(es):

- ____ I have already spoken on the phone to an Adoption Screener. If so, please fill in name: _____
- ____ I have left a message on Adopt-A-Pet voice mail but have not yet received a call back. Date called: _____
- ____ This is my first contact with Adopt-A-Pet. I have not left a voice mail nor spoken with anyone yet.
- ____ I have adopted from Adopt-A-Pet in the past. When? _____ Pet's name & ID#: _____

When were you hoping to adopt? Immediately Next few days Next few weeks Next few months

CONTACT INFORMATION

Primary Applicant's Name: (First-Middle-Last)	Age	Home phone	Work Phone	Cell Phone
Co-Applicant's Name: (First-Middle-Last)	Age	Relationship	Work Phone	Cell Phone
Email 1	Email 2			
Address:	Apt #:			
City:	State:	Zip:		

FAMILY DYNAMICS

# of adults in household	Relationship to Primary applicant	# of children in household	Ages of girls	Ages of boys
Do you expect your current family situation to change?		If yes, how?		
Has anyone in the household ever been convicted of domestic battery, animal cruelty or a violent crime?				<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide details				
Are you willing to let an Adopt-A-Pet representative visit your home before and/or after adoption?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Does everyone in the household wish to adopt a pet?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If not, who is not in agreement?	
Does anyone in the household have an allergy to dogs?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, who?	
If so, how will you handle the situation?				
If your new boyfriend/girlfriend is allergic to the pet, how will you handle it?				
If there were a new baby in the house, what would happen to your dog?				

HOUSING

Do you: (Click box next to your answer)	<input type="checkbox"/> Own	<input type="checkbox"/> Rent	<input type="checkbox"/> Live with relatives
Do you live in a: (Click box next to your answer)	<input type="checkbox"/> Home	<input type="checkbox"/> Condo/Townhouse	<input type="checkbox"/> Dorm
	<input type="checkbox"/> Apartment	<input type="checkbox"/> Mobile home	<input type="checkbox"/> Other
How long at current address?			
If less than 2 yrs., what was your	Previous Address	City State Zip	How long at previous address?
If you rent: (if you do not rent go to next section)			
does your lease allow dogs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	Restrictions?
Name of Landlord:	Phone		
If you live in a condo/townhome: (if you do not live in a condo or townhome go to next section)			
does association allow dogs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	Restrictions?
Name of condo/townhouse property manager	Phone		
Do you plan to move in the foreseeable future?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when?	
If yes, what type of housing will you be moving into?			
If you ever moved into a building that did not allow pets, what would you do with your dog?			
If you moved out of state, what would you do with your dog?			
If you died or became incapacitated or other unforeseen circumstances arose in your life where you were unable to keep your dog, is there a back-up person you have made arrangements with to take your dog?			
	If yes, name of person	Relation	Phone
If no, what would happen to your dog?			

AVAILABILITY

How often do you travel?			
How will you provide for your dog when you travel?			
Do you work full-time? Work part-time? Attend school? Retired? <i>Please check box.</i>	Applicant		Co-applicant
	<input type="checkbox"/> Work Full-time	<input type="checkbox"/> Work Part-time	<input type="checkbox"/> Work Full-time
	<input type="checkbox"/> Stay at home	<input type="checkbox"/> Attend School	<input type="checkbox"/> Work Part-time
	<input type="checkbox"/> Retired	<input type="checkbox"/> Other	<input type="checkbox"/> Stay at home
			<input type="checkbox"/> Attend School
			<input type="checkbox"/> Other
Is anyone in the household a stay-at-home person?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, who?	
If no, how many hours will dog be left alone?			
Where will your dog be when ...	you're home	you're not home	you're asleep
Will your dog generally be kept:	<input type="checkbox"/> Inside	<input type="checkbox"/> Outside	<input type="checkbox"/> Inside/outside
How many hours a day will your dog be outside?			
When outside, where will dog be? (check all that apply)			
<input type="checkbox"/> Leash walked	<input type="checkbox"/> Tied/chained on porch	<input type="checkbox"/> Tied/chained in fenced yard	<input type="checkbox"/> Tied/chained in unfenced yard
<input type="checkbox"/> Dog run	<input type="checkbox"/> Dog house	<input type="checkbox"/> Loose in unfenced yard	<input type="checkbox"/> Loose in fenced yard
If you have a fenced yard, describe type and height of fence:			

CURRENT AND PAST PETS

Please tell us about your most recent (current and past) pets:						
TYPE (Dog, cat, rabbit, gerbil,...)	BREED/SIZE	GENDER	AGE	SPAYED OR NEUTERED	STILL OWN?	IF NO, WHERE IS PET NOW?
		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Are your current dogs:	<input type="checkbox"/> Indoor	<input type="checkbox"/> Outdoor	<input type="checkbox"/> Indoor/Outdoor	Explain:
Are your current cats:	<input type="checkbox"/> Indoor	<input type="checkbox"/> Outdoor	<input type="checkbox"/> Indoor/Outdoor	Explain:
Are your current dogs heartworm tested annually?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Kept on heartworm prevention?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had a pet?	<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Hit by a car			
Have you ever had to give up a pet?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, what were the circumstances?				
If given up, what did you do with it?				
Have you ever adopted from a shelter/rescue organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, which shelter/rescue?		

Have you recently applied to adopt from another shelter/rescue organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, which shelter(s)?	Shelter:	Date	Status / Reason for not adopting

PET OWNERSHIP

Do you agree to spay/neuter your dog (at our expense) if not already done?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Who will be primarily responsible for:			
<input type="checkbox"/> Feeding the dog	<input type="checkbox"/> Pooper scooper	<input type="checkbox"/> Training the dog	
<input type="checkbox"/> Grooming the dog	<input type="checkbox"/> Walking the dog	<input type="checkbox"/> Vet visits	
Do you have experience with dog training?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please describe:	
How do you plan to discipline the dog?			
Are you <u>willing</u> to attend obedience classes and/or hire a trainer at your own expense?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you <u>plan</u> to attend obedience classes or hire a trainer for your new dog?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you already <u>looked into</u> training programs in your area and decided which one you will use?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you own a training crate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Size:	If no, are you willing to buy one? <input type="checkbox"/> Yes <input type="checkbox"/> No
Which of the following dog behaviors/characteristics present a problem for you? (mark all that apply)			
<input type="checkbox"/> Jumping on furniture/counters	<input type="checkbox"/> Chewing on shoes/furniture	<input type="checkbox"/> Guarding	
<input type="checkbox"/> Jumping an (indoor) fence	<input type="checkbox"/> Playful nipping or mouthiness	<input type="checkbox"/> Digging	
<input type="checkbox"/> Jumping on people	<input type="checkbox"/> Barking/howling	<input type="checkbox"/> Shedding	
How will you resolve this problem?			
How often do you plan to vaccinate your dog?			
If your dog developed a medical condition that cost more than \$500 to treat, what would you do?			
How much do you expect to spend for maintenance for your dog in a year?			
How much time are you prepared to allow for your new dog to adjust to your home?			
What is your anticipated level of exercise with the dog?			
<input type="checkbox"/> Couch Potato	<input type="checkbox"/> Short Walks	<input type="checkbox"/> Hiking/Jogging	
<input type="checkbox"/> Yard Exercise	<input type="checkbox"/> Vigorous Walks	<input type="checkbox"/> Dog Parks	
Based on your lifestyle, what level of sociability and outside exposure do you anticipate your dog will have?			
<input type="checkbox"/> Dog rarely leaves home	<input type="checkbox"/> Regular visits to dog park	<input type="checkbox"/> Dog goes everywhere with me	
<input type="checkbox"/> Walks around the neighborhood	<input type="checkbox"/> Regular visits to doggie daycare	<input type="checkbox"/> Dog goes along on family trips	

DOG OF INTEREST

Why do you want to adopt a dog? (check all that apply)		
<input type="checkbox"/> Companion for me	<input type="checkbox"/> For a child	<input type="checkbox"/> Watch dog
<input type="checkbox"/> Family pet	<input type="checkbox"/> To breed	<input type="checkbox"/> Companion for another pet
<input type="checkbox"/> Gift or surprise	<input type="checkbox"/> Other - Explain: _____	

DOG OF INTEREST

What characteristics are most important to you when considering which dog you'll adopt? (check/fill in all that apply)

<input type="checkbox"/> Good with large dogs	<input type="checkbox"/> Obedience trained	<input type="checkbox"/> Good with cats	<input type="checkbox"/> Good with kids
<input type="checkbox"/> Good with small dogs	<input type="checkbox"/> Housebroken	<input type="checkbox"/> Friendly/well socialized	
<input type="checkbox"/> Male	<input type="checkbox"/> Long hair	Age Range: _____	
<input type="checkbox"/> Female	<input type="checkbox"/> Short hair	Breed or type: _____	
<input type="checkbox"/> Doesn't matter	<input type="checkbox"/> Non-shed	Size: _____	
	<input type="checkbox"/> Doesn't matter	Color: _____	

I would consider providing a permanent home to: (check all that apply)

<input type="checkbox"/> Shy/Timid dog	<input type="checkbox"/> Quiet dog	<input type="checkbox"/> Handicapped dog	<input type="checkbox"/> Special medical needs dog
<input type="checkbox"/> High Energy dog	<input type="checkbox"/> Senior dog	<input type="checkbox"/> Dog that needs training	<input type="checkbox"/> Dog that needs housebreaking

I am interested in (name of dog): _____ (*1st choice*) or _____ (*2nd choice*)

PLEASE READ CAREFULLY: Adopting a dog or a puppy is a serious responsibility. A dog you adopt today will likely be a part of your family for the next 10 to 20 years. A dog makes considerable demands on your time and resources. As a dog owner, you will need to spend time training, socializing, grooming, feeding, scooping poop, exercising and playing with your dog each day. Dogs that have not had training need even more time and socialization. All dogs require regular medical care. Some dogs require special food or medications. Some dogs require regular professional grooming. Vet bills, pet sitting and vacation boarding fees may add considerable expense to your family budget.

Yes No **ARE YOU PREPARED TO ACCEPT THE PERSONAL AND FINANCIAL RESPONSIBILITY OF OWNING A DOG?**

Yes No **ARE YOU WILLING TO MAKE A LIFETIME COMMITMENT TO THIS DOG (10-20 YRS.)**

Please continue to next page

OFFICE USE ONLY			
Application Checked by		Date	
Applicant Interviewed by		Date	
Landlord/Condo Check		Date	
Back-up Person*		Date	
Vet Check #1		Date	
Vet Check #2		Date	
Reference #1		Date	
Reference #2		Date	
Reference #3		Date	
Reference #4		Date	
Shelter Check		Date	
Home Check		Date	
Comments/Concerns			
Approved by		Date	
Denied by		Date	
Reason Denied			

*Person to take pet if potential adopter died or became incapacitated or other unforeseen circumstances arose in their life where they were unable to keep their pet.