



# ADOPTION APPLICATION

I am interested in adopting (check one)  CAT  DOG  OTHER

Name of animal(s) I am submitting this application for: \_\_\_\_\_

Name: \_\_\_\_\_ Spouse/Partner Name: \_\_\_\_\_

Employer: \_\_\_\_\_ Spouse/Partner Employer: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

How long have you lived at this address?: \_\_\_\_\_ Do you plan to move in the next six months?: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Drivers Licence Number: \_\_\_\_\_

**Please Check:**  Rent  Own  Live with relatives

Landlords Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

People in your household: # of Adults: \_\_\_\_\_ # of Kids: \_\_\_\_\_ Ages of Kids: \_\_\_\_\_

Do children visit your home?: \_\_\_\_\_ How often?: \_\_\_\_\_ Ages Of Kids: \_\_\_\_\_

**Please list current household pets**

**Veterinarian for current/previous pets:** \_\_\_\_\_

Type & Breed	Sex	Altered	Age	Indoors/Outdoors	Current on Vaccines
	M F	Yes No		In Out Both	Yes No
	M F	Yes No		In Out Both	Yes No
	M F	Yes No		In Out Both	Yes No
	M F	Yes No		In Out Both	Yes No

*This application will be considered without regard to race, color, gender, age, disability, religion, political or national origin. This institution is an equal opportunity provider and employer.*

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

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



# ADOPTION SURVEY

I am interested in adopting (check one) CAT DOG OTHER

Name of animal(s) I am submitting this application for: \_\_\_\_\_

I have experience caring for a cat/dog/other:	Yes	No	I currently own	
The last time I owned a cat/dog/other if not currently:				
My cat/dog/other needs to get along with (circle all that apply):	Children Under 8	Children over 8	Elderly People	Cats Dogs Other
My cat/dog/other will primarily be:	Indoors	Outdoors	Both	
How many hours will your cat/dog/other spend outside per day:				
My cat/dog/other will be left alone:	Less than 2 hours	2-4 hours	4-8 hours	8+ hours
When I am not home my <u>dog</u> will be:	Free roaming	Confined to one room	In a crate	In basement/ garage
When I'm home I want my cat/dog/other by my side:	All of the time	Some of the time	Doesn't matter	
I would consider my household to be	A library	Middle of the road	A carnival	
My ideal cat/dog/other would be:	Calm/mellow	Playful some of the time	Very playful/ high energy	
My cat/dog/other needs to be able to adjust to new situations quickly:	Not important	Somewhat	Yes	
I want my cat/dog/other to be:	A lap cat/snuggly	Social	Independent	A barn cat
I prefer my cat/dog/other to be talkative/vocal:	No	Yes	It is not important	
I am willing to work on training to improve manners and socialization:	Not at all	Some training	A lot of training	
I am willing to work with a pet with special needs:	Medical: <input type="checkbox"/> Yes <input type="checkbox"/> No		Behavioral: <input type="checkbox"/> Yes <input type="checkbox"/> No	
It is most important to me that my pet: _____				