



## Dog Adoption Application

Not every pet will fit into your lifestyle. Our adoption counselors will ask you many questions to determine which pet will do well in your home and which will not. We want the pet you choose to be the one you will love for its lifetime! Please understand that we deal with homeless animals. Many of our animals come from unknown backgrounds. The adoption process may seem time consuming, but we wish to maximize an animal's chance for a successful adoption. Adopting a companion pet is a major consideration and responsible pet ownership demands a considerable commitment.

### To be considered as an adopter, you must:

- Be 21 years of age or older
- Have photo ID showing age and current address
- Have the knowledge and consent of your landlord
- Be able and willing to provide training, medical care, and loving attention for a pet
- Understand that there are no refunds once the adoption is complete

### Applicant Information:

Are you 21 years of age or older?  Yes  No

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

Daytime Phone #: \_\_\_\_\_ 2<sup>nd</sup> Phone #: (for microchip) \_\_\_\_\_

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

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

Email: (required for pet health insurance gift) \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

If less than 3 yrs., previous address: \_\_\_\_\_

Do you own the home? \_\_\_\_\_

Rent? \_\_\_\_\_ (a statement from the landlord with address & phone number is required)

Does anyone in your household have allergies to dogs or cats? \_\_\_\_\_

Are there any children in the family? \_\_\_\_\_ How many and what ages? \_\_\_\_\_

What is your occupation? \_\_\_\_\_ Place of employment? \_\_\_\_\_

Employer's Phone #: \_\_\_\_\_

Are you adopting for yourself or someone else? \_\_\_\_\_

Who will be responsible for the care of the pet? \_\_\_\_\_

**1. Dogs typically live 10-18 years.** Are you financially prepared to provide the necessary care for your pet including: proper food, heartworm prevention, vaccinations, parasite control (fleas, ticks, worms, etc.), city licensing, adequate shelter, and veterinary care for yearly check-ups, or an after-hours medical emergency or illness, which could cost \$500 or more each year?  Yes  No  Tell me more

2. How would you describe your home environment?

- Very Active     Active     Calm     Very Calm

3. Why do you want this dog?

- Companionship     Outdoor Dog     Indoor Dog     Guard Dog     Companion for other pet  
 Breeding     Gift     Hunting     Other (explain)\_\_\_\_\_

4. I want a dog that seeks attention:

- All the time     Some of the time     Occasionally

5. What arrangements will you make for the care of your pets in case of emergency?

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6. What do you consider a good reason to give up your pet?

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7. Where will your dog live?

- Indoor only     Outdoor only     With free access to both indoors & outdoors  
 Other \_\_\_\_\_

8. When outdoors, what type of shelter will be provided? \_\_\_\_\_

9. What type of fence do you have?

- None     Chain-link     Privacy     Other (please specify) \_\_\_\_\_

10. What is the height of your fence? \_\_\_\_\_

11. Is your fence "dog secure" ?     Yes     No     Unsure     Tell me more

If yard is not fenced or secure, how will you "potty" your dog? \_\_\_\_\_

12. Do you understand that dogs may take from one day to five months to adjust to their new environment?     Yes     No     Tell me more

13. How long will your dog be left alone on a daily basis?

- More than 9 hrs./day     4-9 hrs./day     Less than 4 hrs./day

14. Where will your pet sleep at night?

- Outdoors     Pet Bed     Owner's Bed     Crate     Other \_\_\_\_\_

15. If you currently have other pets, will they adjust to a new dog in the house?

- Yes     No     I don't know

16. Have you ever used a crate to train a pet?     Yes     No     Tell Me More

17. Have you trained a dog in basic obedience in the past?     Yes     No

18. Have you ever brought an animal to an animal shelter under any circumstances?

Yes  No If yes, why? \_\_\_\_\_

19. Are you aware of the importance of Heartworm Prevention?  Yes  No  Tell Me More

20. What is the name of your Veterinarian or Veterinary Hospital? \_\_\_\_\_

**PET HISTORY: In the past 5 years, what pets have you owned (include those pets that have passed)?**

<b>Pet Name:</b>	
<b>Breed/Type:</b>	
<b>Age:</b>	
<b>Sex:</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Kept Where?</b>	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Both
<b>Spayed/Neutered?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
<b>Current on Vaccinations?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
<b>On Heartworm Prevention?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
<b>Do you still have?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>If no, why?</b>	

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21. Adopting a dog will require new responsibilities and changes in your life.

**Have you considered the following? :**

- Time spent giving daily attention
- Shedding/ grooming
- Administering medications if needed
- Supervising young children’s interactions w/ the dog (for the safety of both the child and dog)
- Damage to property (ex. chewing furniture, chewing wires, etc.)
- Housetraining (if indoors)
- Dog-proofing your home to prevent dog hazards and damage to valued items
- If you go away for a few days, or on a vacation, who will take care of the dog?

**If adopting a Puppy:**

- Being prepared for accidental soiling
- Puppy-proofing your home (very similar to child-proofing your home)
- Puppies require a great deal more attention and supervision than adult dogs. They have a very high energy level and can easily get into trouble chewing on wires, eating hazardous items, etc.
- A puppy will also require a lot more training. (housetraining, manners, etc.)

**I would like additional information on the following:**

✓ **CATS**

<input type="checkbox"/>	Destructive Scratching
<input type="checkbox"/>	Solving Litter Box Problems
<input type="checkbox"/>	Solving Aggression Between Family Cats
<input type="checkbox"/>	Common Cat Hazards
<input type="checkbox"/>	How to Trim a Cat’s Claws
<input type="checkbox"/>	Introducing Your New Cat to the Litter Box
<input type="checkbox"/>	Declawing Information
<input type="checkbox"/>	Introducing Your Dog to a New Cat
<input type="checkbox"/>	Enriching Your Cat’s Life
<input type="checkbox"/>	Foods That Are Hazardous to Cats
<input type="checkbox"/>	Cats Who Eat Plants
<input type="checkbox"/>	Training Your Cat

✓ **DOGS**

<input type="checkbox"/>	Crate Training
<input type="checkbox"/>	Separation Anxiety
<input type="checkbox"/>	Housetraining Your Puppy
<input type="checkbox"/>	Puppy Mouthing
<input type="checkbox"/>	Re-Housetraining Your Adult Dog
<input type="checkbox"/>	Introducing Your New Dog to Your Resident Dog
<input type="checkbox"/>	Introducing Your Cat to Your New Dog
<input type="checkbox"/>	Positive Reinforcement Training
<input type="checkbox"/>	Foods That Are Hazardous to Dogs
<input type="checkbox"/>	Enriching Your Dog’s Life
<input type="checkbox"/>	Destructive Chewing

*I HEREBY RELEASE TO THE DOROTHY O’CONNOR PET ADOPTION CENTER ALL VETERINARY RECORDS OF ANY AND ALL ANIMALS I OWN OR HAVE OWNED. I CERTIFY THAT I AM 21 YEARS OF AGE OR OVER AND THAT ALL THE INFORMATION IN THIS APPLICATION IS TRUE AND I UNDERSTAND THAT FALSE INFORMATION OR UNANSWERED QUESTIONS MAY VOID THE APPLICATION. I ALSO UNDERSTAND THAT THE DOROTHY O’CONNOR PET ADOPTION CENTER RESERVES THE RIGHT TO DENY ANY ADOPTION APPLICATION.*

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**STAFF USE ONLY:**

- Vet Checked     
  Landlord Check     
  Adopter Check     
 Staff Initials \_\_\_\_\_  
 Approved     
  Denied (specify reason)     
  Pending     
 Placed on **Hold** until \_\_\_\_\_

**Animal Name:** \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_