

# A.D.O.P.T.

## Animals Deserving of Proper Treatment

Name \_\_\_\_\_

Last

First

Date \_\_\_\_\_

Please fill out both sides of the form as completely as possible. Your answers help us find you the most compatible pet. Information is for A.D.O.P.T. use only.

Address \_\_\_\_\_  
street apt. number city state zip code county

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

How long at current address? \_\_\_\_\_ Email address \_\_\_\_\_

Please circle the appropriate response throughout this questionnaire:

Married Single Roommates

Under 21 21-30 31-40 41-50 51-60 61-70 70+

### DOGS

I am considering adopting a dog \_\_\_\_\_ months/years old.

Breed or Size Preference: \_\_\_\_\_ Sex: Male Female

### CATS

Adult Cat (over 1 yr.) Adolescent (4 mos.- 1 yr.) Kitten (2-4 mos.) Sex: Male Female

1. The reason I want a pet is \_\_\_\_\_
2. Who is the pet for? \_\_\_\_\_
3. Is the pet a gift? \_\_\_\_\_ For whom? \_\_\_\_\_
4. No. of adults in household \_\_\_\_\_ No. of children \_\_\_\_\_ Ages of children \_\_\_\_\_
5. Do children visit your house? \_\_\_\_\_ Ages of children \_\_\_\_\_
6. Are all members of your household here? \_\_\_\_\_
7. Whose responsibility is the care of this pet? \_\_\_\_\_
8. What concerns does your family have about adopting a new pet? \_\_\_\_\_
9. Who has allergies and to what animals? \_\_\_\_\_
10. Do you RENT or OWN?
11. House Townhouse Condo Apartment Mobile home Live with relatives  
If renting, are pets allowed? \_\_\_\_\_ Deposit? \_\_\_\_\_ Weight Limit? \_\_\_\_\_ lbs.  
Name of complex \_\_\_\_\_  
Name of landlord \_\_\_\_\_ Phone \_\_\_\_\_
12. If you move where pets are not allowed, what would you do with the pet? \_\_\_\_\_
13. Do you have a yard? \_\_\_\_\_ Presently, is it completely fenced? \_\_\_\_\_  
If fenced, type and height \_\_\_\_\_
14. If no fence, how will you keep your pet in your yard? \_\_\_\_\_
15. Where and how will you exercise your pet? \_\_\_\_\_
16. How many hours per day will pet be alone? \_\_\_\_\_
17. Please list pets you currently have at home:

over

**Dog(s)**

Breed	Indoor/Outdoor	M/F	Age	Heartworm Tested?	Spayed/Neutered?	Vaccinated?
				Yes / No Date:		

**Cat(s)**

Breed	Indoor/Outdoor	M/F	Spayed/Neutered	Age	Vaccinated	Declaw? 2 paw or 4 paw

18. List any other pets you have owned in the last 5 years:

Were any lost? \_\_\_\_\_ Hit by a car? \_\_\_\_\_ Put to sleep? \_\_\_\_\_ Given away? \_\_\_\_\_  
 Explain any yes answers \_\_\_\_\_

19. Your vet's name and clinic, address and phone number \_\_\_\_\_

20. My pet will be kept in (please circle all that apply)  
 House    Garage    Basement    Outdoors    Outdoor kennel    Tie-out    Crate

21. Will you crate-train your new pet? \_\_\_\_\_

22. Do you need instruction and literature on crate-training or litter box training? \_\_\_\_\_

23. Have you ever attended obedience classes? \_\_\_\_\_ Would you with this pet? \_\_\_\_\_  
 Why or why not? \_\_\_\_\_

24. How will you reprimand your pet for chewing, digging, scratching, housetraining/litterbox mistakes and other mischievous behavior? \_\_\_\_\_

25. What behavior would cause you to return your pet to A.D.O.P.T.?

26. How did you hear about A.D.O.P.T.? \_\_\_\_\_

27. Have you applied/ adopted a pet from A.D.O.P.T. or another shelter? \_\_\_\_\_

28. Where? \_\_\_\_\_ When? \_\_\_\_\_ Name of A.D.O.P.T. Pet \_\_\_\_\_

29. Employer's Name \_\_\_\_\_ Phone \_\_\_\_\_

30. Hrs. per day \_\_\_\_\_ Position \_\_\_\_\_

31. Spouse's Employer \_\_\_\_\_ Phone \_\_\_\_\_

32. Hrs. per day \_\_\_\_\_ Position \_\_\_\_\_

33. Please list two references who are not related to you:

Name \_\_\_\_\_ Name \_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

I certify the information provided is complete and correct to the best of my knowledge. I give my permission for any of this information to be verified. I understand A.D.O.P.T. has the right to deny any adoption.

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

**A.D.O.P.T. will not consider any application with false or misleading information.**

Office use only: Adopted pet's name and number \_\_\_\_\_

Vol. \_\_\_\_\_ Comments \_\_\_\_\_