



ADOPTION APPLICATION

NAME: _____ DATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOW LONG HAVE YOU LIVED AT THIS ADDRESS? _____

WHAT TYPE OF HOUSING? ☐APT/CONDO ☐HOUSE ☐OTHER DO YOU RENT OR OWN? _____

IF YOU RENT: LANDLORD'S NAME: _____ PHONE: _____

(LANDLORD'S PERMISSION MAY BE REQUIRED IN WRITING)

PHONE (CELL): _____ PHONE (WORK): _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____ OCCUPATION: _____

DRIVERS LICENSE # _____ STATE ISSUED: _____

PLEASE LIST ALL MEMBERS LIVING AT THE ADDRESS (ADULTS AND CHILDREN).

NAME	DATE OF BIRTH	IF OVER AGE 21, PROVIDE DL# AND STATE ISSUED

LIST ALL CURRENT ANIMALS AND ANIMALS YOU HAVE HAD IN THE LAST 10 YEARS.

NAME	BREED	SEX	SPAYED/NEUTERED? IF NOT WHY?	CURRENT ON VACCINATIONS?	DO YOU STILL OWN? IF NOT, WHY?

VETERINARIAN: _____ PHONE: _____

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ARE YOU WILLING TO CRATE TRAIN THE DOG? _____

IS YOUR YARD COMPLETELY FENCED? _____ PRIVACY OR CHAIN? _____ HEIGHT: _____

WHAT PERCENTAGE OF TIME WILL THEY SPEND INSIDE? _____ OUTSIDE? _____

WHEN THEY ARE OUTDOORS, HOW WILL THEY BE KEPT (FENCE, KENNEL, ETC.)? _____

IN GENERAL, HOW MANY HOURS WILL THEY BE LEFT ALONE DURING THE DAY (AT WORK, ERRANDS)? _____

WHERE WILL THIS PET BE KEPT WHILE YOU ARE AWAY FROM HOME (CRATE, YARD, ETC.)? _____

WHO WILL BE FINANCIALLY RESPONSIBLE FOR ADEQUATE MEDICAL CARE FOR THIS PET? _____

HAVE YOU EVER SURRENDERED A PET OR HAD A PET EUTHANIZED? IF SO, PLEASE EXPLAIN.

PLEASE PROVIDE TWO PERSONAL REFERENCES.

NAME: _____ RELATION: _____ PHONE: _____

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FOR OFFICE USE ONLY:

☐ **APPROVED**

☐ **DENIED**

INITIALS: _____

DATE: _____

COMMENTS: _____

