



A 501(c)(3) Non-Profit Animal Rescue Organization

DOG ADOPTION APPLICATION

Driver's License information will be requested when you adopt. Please have your driver's license with you.

Please answer every question or your application will not be considered. If any answers are found to be incorrect or untruthful it will void an adoption. If you do not receive a response within 24 hours of submitting an application please email again. We do not ignore applications submitted.
E mail application to: joanmarie123@cox.net

What is the name of the dog you are interested in adopting: _____

Name: _____

Address: _____

City, State, Zip: _____

Phone number: _____

Email Address: _____

Are you the head of household? _____

If not, head of household must fill out the application or we will not consider it even if you are of an adult age living in the home.

Please list ALL of the animals (dogs, cats and rabbits) you have had in the past 5 years and that you currently own. Failing to include an animal will void a potential adoption.

<u>Type/breed</u>	<u>sex</u>	<u>age</u>	<u>spay/neutered</u>	<u>where are they now?</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

If you have not had any animals in the past five years, please detail your experience with animals whether as a child or in your lifetime. What breed(s) of dog you have owned and for how long you have had that dog?

Why do you want to adopt this animal? (Please check all that apply)

___ companion ___ guard dog ___ gift

___ for children ___ family companion

How many adults are in your household? _____ What are the ages of the adults? _____

Please explain the relationship of the people in the home (roommates, significant others, mom, dad, children, etc.) and which member of the home you are in this household.

How many children? _____ Ages? _____

If there are no children do you expect that to change in this pet's lifetime? _____

Has every member of your family agreed to this adoption? _____
If this has not been discussed at great length, please complete application when that has occurred.

Do you have a planned vacation in the next month? _____

Are you prepared to adopt immediately and take your pet home? If not, when? _____
If not, within the next 7 days, please complete application when you are prepared to do so.

Does any member of your family have allergies or asthma? _____

What type? _____

Is someone home during the day? _____ Who? _____

How many hours a day will this pet be alone during the day? _____

When I am home this pet will be kept?

___ house ___ garage
___ yard ___ outdoor kennel
___ tie out ___ crate

When I am not home this pet will be kept?

___ house ___ garage
___ yard ___ outdoor kennel
___ tie out ___ crate

Do you live in a: ___ house Do you: ___ own
 ___ townhouse ___ rent
 ___ apartment ___ other
 ___ duplex
 ___ condo
 ___ mobile home

Landlord Info. (Name and Phone Number) _____

Where will this pet sleep? _____

If you move (locally, out of state, or out of the country) what will you do with this pet?

Do you plan to take this dog to obedience classes and where? _____

Have you ever taken a dog to obedience classes and where? _____

Do you have a fenced yard? _____ What type? _____ Height at lowest point? _____

Do you have a pool? _____ Is the pool gated? _____

Who will be the vet for this pet? (Name and Phone number) _____

Which reasons are acceptable reasons for giving up your pet (s)
(Please check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> fence jumping | <input type="checkbox"/> allergy |
| <input type="checkbox"/> moving | <input type="checkbox"/> housebreaking accidents |
| <input type="checkbox"/> illness | <input type="checkbox"/> spraying |
| <input type="checkbox"/> biting | <input type="checkbox"/> showing teeth |
| <input type="checkbox"/> chewing | <input type="checkbox"/> too active |
| <input type="checkbox"/> stealing food | <input type="checkbox"/> scratching |
| <input type="checkbox"/> growling | <input type="checkbox"/> hides for a week |
| <input type="checkbox"/> puppy/kitten | <input type="checkbox"/> compatibility w/ other pets |
| <input type="checkbox"/> Destructiveness | |

If you did not mark any reasons, why not? _____

Are you willing to housebreak a dog? _____

How will you deal with the following issues? Please do not write training. We are looking for specific ways you will deal with these issues. **Please be thorough.**

Chewing: _____

Digging: _____

Barking: _____

Housebreaking: _____

Please tell us why this dog is a good match for your family and why you are interested in this particular dog. Please tell us how this dog will fit into your lifestyle and what your expectations or hopes are for adding this dog to your family. Please note that this may be the most important part of the application and in our determining that you're the right match for this dog. Please add any information that you believe is pertinent to our making this decision:

Have you ever had to give up a pet? _____

When? _____ Why? _____

If your pet gets sick what will you do? _____

You will probably get a follow-up call, e-mail, or a home visit from a DPS Rescue Volunteer to make sure everything is going well with your new pet. Will this be a problem? _____

How did you find out about **PPI** Rescue? (please check one) PetSmart Petfinder Adopt-a-Pet

Other _____