



**Companion Animal Foundation
Dog Adoption Consideration Form**

Date: _____

Name: _____ Driver's License # _____ Exp _____

Phone/Home: _____ Work: _____ Cell: _____

Address: _____ City: _____ Zip: _____

Mailing Address (If different): _____

How long have you lived at your residence? _____

Type of residence: House Apartment Duplex Condo Mobile home

Mother-In-Law Other (please specify): _____

Are you at least 18 years of age? Yes No

Your current Veterinary Hospital: _____

Phone: () _____

Do we have permission to call your veterinarian for a reference? Yes No

Please write in the Dog/Puppy you are interested in adopting:

*Thank you for taking the time to fill out the information below. Many of the questions are asked not only to match you up with a companion that is right for you, but to promote open dialogue as well. A perfect match is always a blessing for everyone. Because an adoption can take 30-60 minutes, adoptions occur between noon and 4:30 pm Monday through Friday **by appointment ONLY**. If these times aren't convenient we will do our best to schedule an appointment at another time*

How long have you been looking for a dog/puppy? _____

Will this be your very first experience having a pet? Yes No Dog? Yes No

Is this your very first experience with a puppy? Yes No

Is the dog you found today close to what you are looking for? _____

Describe the ideal dog for your family: _____

Are you looking for a: Family companion Hunting Dog a gift Child's pet
Guard Dog Companion for other animal(s) Breeding Gift

Other (please specify): _____

Are all of your animals at home spayed or neutered? If not, please explain why _____

What is the earliest age you feel spaying or neutering is appropriate? _____

Explain: _____

Are your pets current on vaccines? _____

If not, why: _____

(please complete the reverse side)



What animals do you currently have in your household:

Name	Species	Breed	Male or Female	Spayed or neutered?	Age or Birthdate

Have more pets? Please list on the back of this application.

Who is the dog for? _____ Do you have children? Yes [] No []
 If this person is a minor, are parents willing to help with all the responsibilities?

Has every member of your household been consulted on bringing a new pet into the family? _____

Is this dog for a family member/someone who doesn't live with you or hasn't met the dog yet? Yes [] No [] Do they plan on meeting the dog prior to adoption? Yes [] No []

Why or why not? _____

Please list all other people living in your household:

Name	Relationship to you	Age if youth	Have they met the animal yet?

Have more people? Please list on the back of this application.

Do you Own/Rent your home? (please circle one). If you rent, is a pet OK with your landlord? Yes [] No [] Not Sure [] Will you be charged a deposit? Yes [] No []

Are there any breed limitations for rental or insurance? Yes [] No [] Not Sure []

Landlord's Name: _____ Phone _____

Name(s) of home ownership (on the title if different than above): _____

Is your yard fenced? Yes [] No [] Type and height: _____

Front and/or backyard: _____

Are you planning to move in the next six months? Yes [] No [] Not Sure []

If you have to move unexpectedly what would you do with your pets? _____

(please complete the next page)



Is your dog going to be indoors only, outdoors only, or both? _____

Will you provide a dog hose or crate? Yes [] No [] Not Sure []

Where will the dog spend the day? _____ Night? _____

Where will the dog sleep? _____

How do you feel about cropping and/or docking? _____

Do you plan on providing a collar for this dog? Yes [] No [] Type: _____

What are you planning of feeding your dog/puppy? Brand: _____

Type: _____

What type of behavior problem would make it difficult for you to continue to keep your dog? _____

Have you ever surrendered a pet to a shelter for any reason? Yes [] No []

Why: _____

Are you willing to take your dog to obedience classes? Yes [] No [] Why or Why not? _____

The average lifespan of a dog is between 10-20 years. Are you prepared to have a dog for that length of time? _____

If you could no longer keep or provide for your pet, what would you do?

If you were faced with a veterinary bill of \$200 or more, would this be a burden for you?

Are you employed? Yes [] No [] Are you retired? Yes [] No []

Employer: _____ Supervisor: _____

How many hours do you work per day? _____ Per week? _____

Self-employed? ____ Work at home? ____ Other: _____

Would your work allow you to bring a dog/puppy to work with you? Yes [] No []

Are you a student? Yes [] No [] Full-time ____ Part-time ____

How many hours are you at school per day? _____ Per week? _____

How much time do you spend at home (on average): _____

Please list 3 personal references (**other than** family members or current partners)

1. Name: _____ Phone: _____ Relationship: _____

2. Name: _____ Phone: _____ Relationship: _____

3. Name: _____ Phone: _____ Relationship: _____

Please know that an adoption may take a day or two (or longer if the kitten is not yet up for adoption) so that the above information can be reviewed and confirmed. You are welcome and encouraged to visit the kittens anytime during visiting hours!

I hereby state that the above information provided herein is complete and correct. Any information that we find that is false without reasonable explanation will be reason to terminate this application and adoption process. By signing below you are granting us permission to continue with this application and to call any necessary references, your veterinarian and landlord (if applicable).

Signature: _____ Date: _____

Print Name: _____

Application Review by: _____ Date: _____

References Called: _____