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 **ADOPTION APPLICATION**

**Welcome to our family and thank you for considering opening up your home to our furry friends!**

**Please fill out and include anything else you wish to share with us so that we can get to know you better.**

**Send this document to spcapv@gmail.com**

PERSONAL INFORMATION:

Today’s Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province: \_\_\_\_\_\_\_\_\_\_\_ Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ May we contact you at work?

Work Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is the name of the pet you are applying to adopt?

What reasons would cause you to return the pet to us?:

COMPANION ANIMAL INFORMATION AND HISTORY:

Have you had pets in the past? If so, please describe. Why are they no longer with you?

Do you have pets currently?

Please list pets you currently have in your home. Include the following information in your list. Type/Breed; sex; age; owned since; comments on personality of each animal.

Are your pets spayed/neutered? If no, please explain.

Are your pets up-to-date on vaccinations?

\*The name and phone number of your veterinarian are mandatory\*

Veterinarian’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you been associated with this vet and/or clinic?\_\_\_\_\_\_\_\_\_\_

Would your pets accept a new dog?

Do you have any male dominant or female dominant pets in your home?

Where are your pets (or one you are applying to adopt) be kept during the day or when no one is at home?

Where do they sleep?

Where are they when you are at home?

Do you crate them? If so, explain.

What do you feed your dogs?

If a commercial food which brand?

What kind of exercise and will the dog receive and how frequent?

If you travel, what arrangements do you make for the care of your pets?

HOUSING INFORMATION:

Do you own \_\_\_\_\_\_\_\_\_ or rent \_\_\_\_\_\_\_\_\_,

a house \_\_\_\_\_\_\_\_, apartment \_\_\_\_\_\_\_\_ or condo \_\_\_\_\_\_\_\_\_?

If renting, how long have you lived at this address?

\*If renting, please provide landlord’s name, address and telephone number.

Landlord’s name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a securely fenced yard? Small dog proof? Jumping dog proof?

What type of fencing? Please describe in terms of material and height

YOUR FAMILY

How many adults are in your home? \_\_\_\_\_\_\_\_ Children \_\_\_\_\_\_\_

Names and ages of people living in your home

1.

2.

3.

4.

5.

Is everyone living in your home agreeable to having a dog?

Do other children visit your home?

How would you describe the activity level of your household? i.e. quiet, structured, busy, hectic etc….

What are the working hours of the adults in the household?

How long will the dog be left alone at home each day?

Who would care for the dog when the adult(s) are not home?

Will it be an inside or outside dog?

Please give hours dog will be outside and hours it will be inside.

Does anyone in your home have allergies? Please describe.

Have you ever housebroken a puppy or dog?

How would you approach housebreaking a dog? Please explain in detail.

What forms of discipline do you feel are appropriate for training or modifying behaviour in a dog?

Comments or Questions? Please feel free to include any information that you feel we should know about you, your family, your experience with pets.

REFERENCES:

Please provide us with at least two references in addition to your vet.

Please provide full name, telephone number(s) and relationship for all references

**Name(printed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Thank you for being Pawesome and considering adopting an SPCA animal in need! Together we are making miracles happen.**

**Please return this document once completed to** **spcapv@gmail.com**