



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?

If you don't have a specific dog in mind, please tell us what kind of dog you are interested in (consider age, size, temperament energy level, breed)

I want this pet for the following reasons (check all that apply). *

For my children

As a companion

As a watchdog

For a relative or friend as a gift

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? What exposure have they had with other pets in and out of your home? What is their behaviour like with other animals?

Where will the pet you are applying to adopt be kept during the day or when no one is at home?

Where will it sleep?

Where will it be when you are at home?

Will you crate the dog? If so, explain.

What will you feed the dog?

If a commercial food which brand?

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

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

Have you ever relinquished a pet to a shelter or rescue, or rehomed it? *
If yes, please explain the circumstances.

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

Are you planning on moving within the next months/years?

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?

Are you familiar with rewards-based training methods that do not involve physical force or dominance? *

Yes

No, but I'm willing to learn

No, I want to use my own alternative method

How much do you think you have to budget for expenses for the dog on a yearly basis? What source of income do you have to make this possible? *

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