



Volunteers: _____

Contact volunteer: _____

Initial Visit Date: _____

Return Visit Date: _____

Return Visit Date: _____

Save the Animals Foundation

Dog Adoption Application

Please Fill Out Completely (Four pages)

Completion of this form does not guarantee adoption of a STAF animal. We are interested in obtaining information from all adults in the household.

Applicant's Name _____ Co-applicant's Name _____

Applicant Email _____ Co-Applicant Email _____

Applicant Contact Phone _____ Co-Applicant Contact Phone _____

Address _____ City/State/Zip _____

How long at this address? _____

Previous Address _____ City/State/Zip _____

Applicant's Employer _____ City _____

How long employed? _____ Phone _____

Co-applicant's Employer _____ City _____

How long employed? _____ Phone _____

Personal References:

1) Name _____ Home Phone _____

Address _____

2) Name _____ Home Phone _____

Address _____

3) Name _____ Home Phone _____

Address _____

Have you ever been convicted of a felony? Yes _____ No _____

Have you previously owned a dog or cat? Dog _____ Cat _____ Neither _____

If you checked "Dog" or "Cat" in answer to the previous question, please complete the following:

- In the column "How Obtained", write if the dog/cat was purchased, given to you, wandered in, was adopted from a shelter, or other. If other, please explain.
- In the column "What Happened", write if the dog/cat was given away, sold, surrendered to an animal shelter, strayed off, abandoned, deceased, or other. If other, please explain.

	Breed of Dog/Cat	How and Why Obtained	How long did you keep?	Your age at that time	What Happened to Dog/Cat?
1.					
2.					
3.					
4.					
5.					

Dog Adoption Application (cont'd)

1. Have you ever bred dogs? Yes _____ No _____
If 'Yes', what breed or mix? _____
Did you breed for: Fun _____ Profit _____ Show _____
Accidentally Happened _____ Other _____
Do you still own this dog(s)? Yes _____ No _____
2. What other animals do you presently own and how many?
Dogs _____ Cats _____ Other _____
Are they spayed/neutered? Yes _____ No _____
3. Will any pets you now have adjust to a new pet in the household? _____
What measures will you take if they do not adjust? _____

4. Do you want to adopt a dog for one or more of the following reasons?
Companion _____ House Pet _____ Watch Dog _____
Hunting Dog _____ Guard Dog _____ Child's Pet _____
Personal Protection _____ Other _____
5. In selection of a dog, what is your preference?
Breed/Type _____ Age _____ Color _____
Personality _____
6. Do you feel obedience training makes a dog a better pet? Yes _____ No _____
7. Have you ever trained a dog at home to:
Sit _____ Lie Down _____ Come _____ Roll Over _____ Stay _____
Shake _____ Speak _____ Other _____
8. Have you ever trained a dog in obedience classes? Yes _____ No _____
What method was used? _____
9. How many adults are there in your household? _____
10. How many children are there in your household? _____
What ages are they? _____
11. Who will be responsible for the care and feeding of the dog?
Feeding _____ Walking _____ Exercise _____
12. Do you travel a great deal? Yes _____ No _____ Are you away for military duty? Yes _____ No _____
If 'Yes', how will you provide for the dog while you are gone? _____
13. If you go away for a few days or on vacation, who will take care of your dog? _____

14. Does anyone in the family have allergies? Yes _____ No _____ If Yes, to what? _____
15. Is someone home during the day? Yes _____ No _____ Who? _____

Dog Adoption Application (cont'd)

16. How many hours will the dog be alone during the day? _____

17. How many days will the dog be alone during the week? (Explain hours and days alone, i.e., work, school, volunteer work, shopping, etc.) _____

18. Do you live in a: House _____ Apartment _____ Condo _____
Townhouse _____ Mobile Home _____

19. Do you own or rent your home? _____

If renting, please provide:

Owner's Name _____ Phone _____

Address _____

20. Do you have any activities that would include the dog? _____

21. Do you have a yard that is:

Completely fenced _____ Partially fenced _____ Not fenced _____

FOR FENCED YARDS, WE DO CONDUCT FENCE CHECKS. A fence must be suitable for the dog you choose, and MUST be in good repair prior to adoptions (with no holes, gaps or areas where a dog could easily escape). Is your fence currently in good condition, or will it need repairs?

Currently in good condition _____ Will need minor repairs _____

Will likely need extensive repairs _____ Not sure _____

If fenced, please describe the area fenced, including size, and draw a diagram below.

Fencing material used:

Block Wall _____ Chain Link _____ Chicken wire _____

Privacy Fence _____ Wrought Iron _____ Wood _____

Other _____

What is the height of the fence? _____ How many gates? _____

What is the height of the gates? _____ Do you keep them locked? _____

What method is provided to keep the dog from digging under the fence or gate?

22. Do you have a swimming pool? Yes _____ No _____ Is it fenced? _____

Do you have some method of protection to guard against accidents? _____

23. Would this dog be primarily a house dog? Yes _____ No _____

24. Would this dog be primarily left outdoors? Yes _____ No _____

Where? Yard _____ Patio _____ Kennel & Size _____

Other _____

25. Where will this dog be kept during the day? _____

During the night? _____

Dog Adoption Application (cont'd)

26. What type of outside shelter will be available to the dog? _____

27. Do you have a doggie door? Yes _____ No _____

28. Would you object to an inspection of your premises by STAF? Yes _____ No _____

29. Will you keep the dog updated on all vaccinations? Yes _____ No _____

30. Are your dogs at home up-to-date on their vaccinations? Yes _____ No _____

30. Do you believe a pet should be spayed or neutered? Yes _____ No _____

Why or Why Not? _____

31. Who is your veterinarian? _____

Address _____

May we contact him/her? Yes _____ No _____

32. How much would you estimate your annual expenses for this dog to be? _____

33. Under what circumstances would you not keep the dog? (check all that apply)

New baby _____ Your illness _____ Dog's illness _____

New job _____ Divorce _____ Move _____

Dog's behavior _____ New pets in home _____ Other _____

34. Pets are not allowed at some residences. Would you consider such a move? Yes _____ No _____

If 'Yes', what actions would you take to find your dog a new home? _____

35. Have you applied to adopt from STAF in the past? Yes _____ No _____ When? _____

36. How did you hear about STAF? _____

Comments by Applicant(s): _____

I certify that the information given in this application is true and complete to the best of my knowledge. I also understand that falsified information or significant omissions may disqualify me from further consideration of a STAF animal. I will not hold STAF responsible for any injuries sustained while on STAF premises, during walks, on home visits or at any time during the potential adoption process to myself or anyone with me.

Applicant's Signature

Date

Co-Applicant's Signature

Date

Thank you for your time and interest.



FOR STAF VOLUNTEER USE

Please note the date if it is a return visit

Dogs Met:

Notes: