



E-Mail to: [Adoption@care4pets.org](mailto:Adoption@care4pets.org)

## E-Dog Adoption Application Page 1

1. Date: \_\_\_\_\_
2. Dog's Name: \_\_\_\_\_
3. Your Name(s): \_\_\_\_\_
4. Phone Number: \_\_\_\_\_
5. Address: \_\_\_\_\_
6. Who shares your household? Spouse    Roommate    Children    Other: (Describe) \_\_\_\_\_
7. Ages of offspring, if any: \_\_\_\_\_
8. Type of dwelling: House    Apartment    Condo    Other: (Rent Or Own) \_\_\_\_\_
- 9a. What is your occupation? \_\_\_\_\_
- 9b. Occupation of your housemate/spouse? \_\_\_\_\_
10. Do all adults in your household know you plan to adopt a dog? Yes    No
11. If you rent, do you have the landlord's permission to have a dog? Yes    No    Can we see your lease? \_\_\_\_\_
12. Who is more the "dog person" (or "dog caretaker"), you or your housemate/spouse? \_\_\_\_\_
13. If your present relationship were to change, with whom will the dog remain? \_\_\_\_\_
14. At what age do you feel children are responsible enough to walk a dog by themselves? \_\_\_\_\_
15. If you were to become disabled and were no longer able to care for the dog, what would you do? \_\_\_\_\_
16. Is anyone in your household allergic to dogs? Yes    No    If yes, who? (Kids, spouse? \_\_\_\_\_
17. Do you have a dog (or dogs) now? Yes    No    If Yes, list breed, sex, age and if spayed or neutered and how did you acquire him/her/them: \_\_\_\_\_

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18. List animals you own other than dogs: \_\_\_\_\_
19. When you go to work or are out of the house, the dog will stay in: House    Yard    Other \_\_\_\_\_
20. Is anyone home during the day? Yes    No
21. How many hours will the dog be left alone during the day? \_\_\_\_\_
22. What percentage of time will the dog be in the house? \_\_\_\_\_ %    Percentage in the yard? \_\_\_\_\_ %
23. Which rooms, if any, are off limits to the dog? \_\_\_\_\_
24. Is the dog allowed on the furniture? Yes    No
25. Where will the dog sleep at night? (Please be specific . . . )  
(if inside): Kitchen    Back porch    Bedroom    Garage    Other: \_\_\_\_\_  
(if outside): Covered patio    Yard    Doghouse    Other: \_\_\_\_\_
26. Do you have a doggie door? Yes    No
27. Will you install a doggie door for your new dog? Yes    No
28. When you go on vacation, who will care for the dog? Pet sitter    Vet    Board at kennel    Friend comes by
29. When you go to work or are out of the house, the dog will stay in: House    Yard    Other \_\_\_\_\_
30. Is anyone home during the day? Yes    No
31. How many hours will the dog be left alone during the day? \_\_\_\_\_
32. Do you have a gardener? Yes    No    A pool person? Yes    No
- If so, where will the dog be staying while they're working? \_\_\_\_\_
33. Do you trust the worker not to let the dog out? Yes    No



## E-Dog Adoption Application Page 2

34. Does the meter person enter your dog's yard when you are not home?      Yes      No
35. Does a housekeeper?                      Yes      No
36. If you rent, does your landlord have a key to your house?    Yes      No      To your gate?    Yes      No
37. If you rent, do you share your yard with other tenants?      Yes      No
38. Do you have a fenced backyard?    Yes      No      Fenced front yard    Yes      No
39. What type(s) of fencing do you have?    Chain Link    Wood      Iron      Cement
- Other: \_\_\_\_\_
40. What is at the bottom of the fence?    Dirt      Grass      Cement
- Other: \_\_\_\_\_
41. How high is the fence?    Height at highest point:                      Height at lowest point:
42. How do you secure your gate?    Padlock    Lock & Key    Latch      Deadbolt
- Other: \_\_\_\_\_
43. During a 24-hour period, when is your gate locked?    Days only    Nights only    When I'm out    Always
- Other: \_\_\_\_\_
44. I don't lock my gate because:    I live in a safe neighborhood    My kids use it a lot    Work people must enter  
I (or my housemate) use it a lot    Meter person must enter
- Other: \_\_\_\_\_
45. In the past, when your dog has run away, what did you do?    Check Shelters    Put up signs    Ads in paper  
Took flyers door to door    Waited, because my dog always comes back    Other: \_\_\_\_\_
- If this happened, in addition to the above, please tell us the details of how it happened and how it was finally resolved (please provide as much detail as possible – use last page if desired): \_\_\_\_\_
- 
46. What brand of food will you feed your dog?    Canned      Dry kibble      Both
47. Will you feed your dog "people food"?    Yes      No      If so, what kind? \_\_\_\_\_
48. Who will be mostly responsible for feeding the dog? \_\_\_\_\_
49. How many times a day will you feed the dog? \_\_\_\_\_
50. Which of the following will you use for flea control?    Flea sprays    Flea baths    Flea collar    Front Line  
Flea comb    Herbal collar    Program      Advantage    Other: \_\_\_\_\_
51. Have you ever trained your dog in obedience class?    Yes      No
52. In which of the following situations would you have your dog off leash?    Park      Hike      Beach  
Neighborhood walk    My front yard
- Other: \_\_\_\_\_
53. What discipline will you use if your dog chews your favorite shoes? \_\_\_\_\_
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54. Which of the following disciplines will you use if your dog is really naughty and just won't listen to reason?

Spank fanny with newspaper    Spank with hand    Swat nose

Other: \_\_\_\_\_

55. When will your dog wear a choke chain?    Never    Always    Only on a walk

Other: \_\_\_\_\_

56. Do you think it is necessary to have you dog wear an ID tag?    Yes    No

If so, what kind?    License    Vet/Rabies    Your name, address, phone

57. Which of the following would force you to give up your dog?    Move locally    Move out of state

Move overseas    Job change involving travel

Other: \_\_\_\_\_

58. Under what circumstances will you NOT keep the dog:    Divorce/Separation    Allergies    Dog barks a lot

Dog digs a lot    Move to where dogs are not allowed    Dog chews a lot    Dog nips at a stranger

Dog bites kids    Big vet bills    Dog develops chronic illness    Dog loses control of bladder or bowels

Other: \_\_\_\_\_

59. In the past, when I was forced to give up my dog, I did one of the following:    Gave it to a relative

Gave it to a friend    Found a home through ad    Gave to adoption group

Gave to city/county animal shelter

Other: \_\_\_\_\_

60. What are your important issues?    Size?    Age range?    Male/female?    Activity level?

Other: \_\_\_\_\_

61. What is the name of your veterinarian? \_\_\_\_\_    City &/or Phone No: \_\_\_\_\_

62. Do you know where the nearest emergency vet clinic is?    Yes    No

63. How did you find our adoption program?    Internet    Referral    Other: \_\_\_\_\_

64. Please list the dogs and cats you have owned since you have been an adult (state length of ownership). Indicate if the

pet was lost, given away, stolen, sold or died (state cause of death): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

65. Under what circumstances would you consider euthanizing a pet?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Adopter

\_\_\_\_\_  
Date