

❧ PET WELFARE ❧



All our tails have happy endings

PET WELFARE ADOPTION APPLICATION

This questionnaire must be completed by anyone interested in adopting a pet from this facility. The following information is requested so that our adoption counselors can assist you in the selection of a new pet. **The animal's welfare is our foremost consideration.** This consultation process is designed to help us determine if the adoption is in the animal's best interest and to assist you in finding an animal most compatible with your lifestyle.

- Applicants must be 18 years of age or older.
- We reserve the right to refuse adoption/placement to anyone. Approval and refusal decision are made solely at the discretion of Pet Welfare (PW).
- Falsifying information on the application will result in disqualification from adoption.
- By submitting and signing this application, you give permission for PW to investigate and confirm the information that you provide and agree to a home visit prior to approval and/or after adoption/placement, if required. You agree that this information can be shared with other shelters and rescue groups. You give PW permission to contact your veterinarian for medical information on any/all animals that you have cared for.

Date _____

Desired Pet's Name _____

****Note: Click to make a selection**

Select one: ___Dog ___Puppy ___Cat ___Kitten

Name _____

Email Address _____

Complete Current Address _____ City/State/Zip _____

Home Phone _____ Work _____ Cell _____

Please answer the following questions honestly. It will help us help you select the right pet for your family.

SECTION I IS TO BE COMPLETED BY ALL ADOPTERS

1. Why do you want this pet? (select all that apply)

___ Companion ___ Hunting ___ Companion for other pet ___ Child's pet ___ Gift

___ Guard/protection ___ Family pet ___ Barker ___ Breeding

Other (please explain) _____

2. Do you have any preferences as to breed, sex, size, coat length, etc.?

3. What qualities are you looking for in the animal that you would like to adopt? Be specific (examples: active, playful vs. mellow, housebroken) so that we can make the best match possible.

16. Are you current pets' vaccinations current? Yes () No ()
 What type of heartworm preventative do you use? _____ Flea/tick preventative? _____
 Current veterinarian clinic _____ City/State _____ Phone _____
17. Will the new pet be kept: (select one) ___ Mostly inside ___ Mostly outside ___ Totally inside ___ Totally outside?
18. How long will this pet be left home alone during the day? _____ hours X _____ days per week
19. Where will your pet stay when it is left alone at home? _____
20. Where do you expect this pet to sleep at night? _____
21. What will you do with this pet when you go on vacation? _____
22. If you experience a *major* lifestyle change (i.e. birth, death, divorce, move), what will you do with this pet?

23. Have you considered the costs involved in having a pet (food, vet care, housing, etc.) and the life span of the animal?
 Yes () No ()
24. Okaloosa County requires all pets to be vaccinated and to be licensed ANNUALLY and when off premises, dogs must be leashed. Cats are not allowed to leave YOUR property. Do you agree to abide by these requirements? Yes () No ()
25. If you live on base, base regulations require that your pet be registered with the base veterinarian and that there be no more than 2 pets unless a waiver has been approved prior to obtaining the additional pet. Do you agree to abide by these requirements?
 Yes () No ()

QUESTIONS #26 – 32 TO BE COMPLETED BY DOG ADOPTERS ONLY

26. Do you have a fenced in yard? Yes () No () What kind? _____ How high? _____
27. How will you keep the dog confined? (select all that apply)
 ___ On leash ___ In house ___ Fenced yard ___ Dog run ___ Chain ___ Crate ___ Runner
28. Do you realize that you will probably have to houstrain this dog? Yes () No ()
 Have you houstrained a dog before? Yes () No ()
 If yes, how? _____
29. Are you familiar with heartworm disease? Yes () No ()
 Do you plan on protecting your dog with a monthly preventative? Yes () No ()
30. Is outdoor shelter available? Yes () No () If yes, what kind? _____
31. If you have cats, have they been exposed to dogs before? Yes () No ()
32. No dog is perfect. Please tell us what behaviors you are unwilling or unable to work through. (select all that apply)
- | | | | |
|-----------------------------------|-----------------------------|-----------------------------|--------------|
| ___ Aggression towards other dogs | ___ Aggression towards cats | ___ Aggression towards kids | ___ Barking |
| ___ Scratching at doors | ___ Thunderstorm anxiety | ___ Separation anxiety | ___ Mouthing |
| ___ Destructive chewing | ___ Jumping up | ___ Rowdy behavior | ___ Escaping |
| ___ Eliminating in the house | ___ Digging | ___ Shedding | |
| ___ Other: _____ | | | |

QUESTIONS #33 – 37 TO BE COMPLETED BY CAT ADOPTERS ONLY

33. Do you plan to declaw this cat? Yes () No () If yes, are you familiar with alternatives to declawing? Yes () No ()
34. Have you litter box-trained cats before? Yes () No () Where will you keep the litter box? _____
35. Is there a doggie door? Yes () No () If yes, will the cat be using it? Yes () No ()
36. If you have dogs, have they been exposed to cats before? Yes () No ()
37. No cat is perfect. Please tell us what behaviors you are unwilling or unable to work through. (select all that apply)
- | | | | |
|--|-----------------------------------|-------------------------|-------------|
| ___ Scratching furniture or carpet | ___ Jumping on counters/furniture | ___ Rough play (biting) | ___ Meowing |
| ___ Eliminating outside the litter box | ___ Shedding | Other: _____ | |

I have answered the screening questions truthfully to the best of my ability. I understand that any misrepresentation of this information is grounds for refusal of adoption. I have read the release statements at the top of the application and acknowledge them.

(Applicant's Signature)

(Co-applicant's Signature)

FOR PET WELFARE USE ONLY – DO NOT WRITE/TYPE BELOW THIS LINE

Application accepted by _____ Date _____

Comments:

Adopter/Interviewer _____ Date _____

___ Approved ___ Rejected ___ Tentatively approved

Reason for rejection:

Other comments or conditions to this adoption:

Notes:

