



## Adoption Application

### PERSONAL INFORMATION (Please print):

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Date: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work/Cell phone: \_\_\_\_\_

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

How did you hear about us? \_\_\_\_\_

### HOUSEHOLD INFORMATION:

#### How many people are in your household?

Adults over the age of 21 (including self)/Ages:

Children (under 21):/Ages:

Does anyone in the household have allergies to dogs? Yes No

If yes, who? \_\_\_\_\_

**Do you live in:** HOUSE APARTMENT CONDO DUPLEX MOBILE HOME TOWNHOME

**Do you:** OWN RENT LEASE How long have you been at this address? \_\_\_\_\_

**If renting/leasing, are there pet restrictions?** YES NO If yes, what are they? \_\_\_\_\_

Landlord's name \_\_\_\_\_ Landlord's phone \_\_\_\_\_

*If renting, we will contact your landlord to ask if adopting animals in your home is acceptable. You will not be able to adopt until we receive positive confirmation.*

### Please list all of your current pets:

Dog/Cat	Breed	Name	Age	M/F	Altered?	How long owned?

*Please use back of application if you run out of space.*

*Dusty Paws Reserves the right to Check or Call your Veterinarian*

**Name of Veterinarian:**

**Office:**

**Number:**

**Location:**

**Describe your yard:**

No yard      Unfenced yard      Partially fenced yard      Completely fenced yard  
Height of fence: \_\_\_\_\_ Fence Material:      Wood      Chain link      Brick      Other

**How would you describe your level of experience with dogs?** *check all that apply*

Never had a dog      Had childhood pet dog  
Had one or more as an adult      Have experience with powerful breeds  
Have experience working with on-going medical problems with a personal dog  
Have experience working at a boarding kennel/resort/pet sitting service etc.  
Have experience working with behavioral problems with a personal dog  
Have experience working in a veterinary hospital  
Am a professional dog trainer  
Have previous foster/rescue experience, if yes, please describe: \_\_\_\_\_

**Do you have experience with:** small dogs    medium dogs    large dogs

**List experience with specific breeds:** \_\_\_\_\_

**Name of Dog you are interested in:**

**If there is no dog you are interested in please provide what you are looking for in the event this dog comes into our care we may contact you before making them adoptable to the public. Be descriptive:**

**How many hours during the AVERAGE day will this dog spend WITHOUT a human?** \_\_\_\_\_

Where will this dog be when someone is home? \_\_\_\_\_

Where will this dog be when alone? \_\_\_\_\_ Where will this dog sleep at night? \_\_\_\_\_

**What situations do you feel unprepared for?**

Excessive barking	Destructive chewing	Not housetrained
Digging	Escaping	Resource (food/toy) aggression
Shy, fearful, or undersocialized dog	Not good with children	Not good with other dogs
Not good with small animals/cats	Scratching/biting	Administering medications
Providing on-going training	Very high activity level	Deaf/Blind dogs

**Do you have a preference on:**

Size?      YES      NO      If yes, please list size preference: \_\_\_\_\_  
Breed?      YES      NO      If yes, please list breed you prefer: \_\_\_\_\_  
Age?      YES      NO      If yes, please list age preference: \_\_\_\_\_

I understand that Dusty Paws has done their best to screen each adoption candidate for safety but due to the length of time in our care and the uncertain history of each animal we cannot always predict how an animal will respond in any given situation. Animals may act out which can include biting (breaking skin), barking, growling, attack of other animals, attack of people, destruction of property, urinating and defecating in unwanted places, etc.

By signing this I attest that I have read and accept responsibility for myself and the animal once animal is placed in my care.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witnessed By

\_\_\_\_\_  
Date

Staff Notes: \_\_\_\_\_  
\_\_\_\_\_  
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