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| --- | --- |
| FULL NAME | Deekshitha M |
| ADDRESS |  |
| Are you over 18 years old? (Yes/No) |  |
| JOB |  |
| ANY EXPERIENCE OF OWNING A DOG ? |  |
| Have you owned pets before? (Yes/No) |  |
| Do you have any outdoor space for the dog? (Yes/No) |  |
| If you travel, who will care for the dog in your absence? |  |
| Do you have a plan for dog training or behavior issues? (Yes/No) |  |
| Are you willing to cover all expenses related to the dog (e.g., food, grooming, veterinary care)? (Yes/No) |  |
| Do you have a preferred veterinarian? (Yes/No) |  |
| Do you agree to a home visit if required before adoption? (Yes/No) |  |
| Do you agree to return the dog to the organization if you can no longer care for it? (Yes/No) |  |

