



Dog/Puppy Adoption Questionnaire

Name: _____ Date: _____

Spouse/roommate: _____ Dog's Information:

Address: _____ Name: _____

City / State: _____ Zip code: _____ Description: _____

Home Phone: _____ Date of Birth: _____

Work Phone: _____ Sex: M neutered F spayed

1. Do you live in a _____ house _____ condo _____ apartment _____ mobile home _____ military housing
_____ other (please explain) _____

2. How long have you lived there? _____

3. Do you rent? _____ yes _____ no

4. If "yes", do you have landlord's permission to have a dog there? _____ yes _____ no

5. May we contact your landlord? _____ yes _____ no Landlords Phone #: _____

6. Are there screens on all doors and windows you open for ventilations? _____

7. Would you object to an inspection of your premises? _____ yes _____ no

8. Where will the dog be kept? _____ indoors _____ outdoors _____ both _____ other
Please explain: _____
Do you have a fenced in yard? _____ yes _____ no

9. How many hours a day will the dog be left alone? _____
Where will the dog be kept during this time?: _____

10. Do you plan to keep an I.D. Tag on this dog? _____ yes _____ no

11. Is anyone in your household allergic to animals? _____ yes _____ no

12. What other animals do you currently own _____ # of dogs _____ # of cats _____ other (type) _____

Please list breed, sex, and ages of all pets: _____

Are they spayed or neutered: _____ yes _____ no

13. Name of veterinarian: _____

14. How many children are living in your home? _____ Please list their ages: _____

15. On the first night home, where will the dog stay? (please be specific) _____

16. Who will be responsible for this dog? _____

17. Have you owned a dog before? _____ yes _____ no If yes, what happened to the dog? If deceased, please include cause of death and how long ago. _____

18. Dogs have been known to bark out of boredom, chew furniture or personal articles, dig holes in yards, etc. How do you intend to handle these potential problems?

19. Even healthy dogs need routine veterinary care. What would you estimate the costs to be?

20. If this dog were to become sick or injured, would you be willing and able to provide adequate veterinary care? _____ yes _____ no

21. How soon after the dog arrives home will it be left alone? _____

22. How often do you leave town? _____

23. How will you plan to care for your dog while you are away? _____

24. What will happen to the dog if you move? _____ locally
_____ out of state _____ overseas

25. Do you know that the life expectancy of a dog may be 10 or 15 years? Are you willing to take responsibility for your dog's entire life? _____ yes _____ no

26. Under what circumstances would you not keep this dog? _____ divorce _____ move _____ new baby
_____ new job _____ illness _____ other (please explain) _____

27. Why do you want a dog? Number those that apply in order of importance; 1 = most important

_____ for children _____ companion for self _____ for spouse _____ protection
_____ as a gift _____ for other pet _____ other (please explain) _____

28. What made you choose this particular dog? _____

29. How did you hear about this dog? _____

I certify that the above is true, and that any false information may result in nullifying the adoption and forfeiture of any fees paid.

Applicant's signature: _____ Date: _____

Screener: _____ Date: _____