

Guided By Grace Rescue Inc.

Dog Adoption Application

Applicant Information

Name:

Address:

City:

State:

Zip:

Home Phone:

Cell Phone:

Email:

Household Information

Family Members (Including Ages):

Type of Residence:

Do You Own or Rent:

Landlord's Name & Phone Number:

Fence Height:

Yard Size:

Pet Experience

Are you a first-time pet parent?

Current Pets (Age, Breed, Type, Weight, Temperament):

Veterinarian's Name & Phone Number:

Are all current pets spayed/neutered?

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Are your pets up to date on vaccinations?

Lifestyle and Environment

Do you smoke?

If yes, do you smoke in the house or car?

How many hours per day will your dog be left alone?

Where will your dog stay when left alone?

Where will your dog sleep at night?

Training & Behavior

How would you handle destructive behavior (e.g., chewing furniture)?

How will you address problem behaviors?

What would you do if your dog has an accident indoors?

Would you hire a professional trainer if needed?

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Do you agree to never use a shock collar?

How would you discipline your dog if a problem arises?

What is your definition of positive reinforcement?

Care & Commitment

How many hours per day will you spend with your dog?

Annual Household Income (Optional):

Brand of Food You Feed or Plan to Feed:

How often and how far do you walk your dog?

Do you use dog parks or dog daycare?

How often would you bathe/groom your dog?

How much time will your dog spend outside alone?

Long-Term Planning

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What would you do if you could no longer care for your dog?

What would you do if you could not afford veterinary care?

Would you describe your household as: Very Active / Moderately Active / Low Key

References (Non-Family Members)

1. Name: _____ Phone: _____

2. Name: _____ Phone: _____

3. Name: _____ Phone: _____

Final Thoughts

Why do you believe a dog would choose YOU as their pet parent?

Is there anything else you would like to share to help us understand the kind of pet parent you are or would be?

Signature: _____ Date: _____