



Name of kitten / cat you are interested in _____

Cat Tail Kitties Screening Form

I understand that completing this application is not as a guarantee that I will be allowed to adopt this pet and that Cat Tail Kitties Rescue has the right and responsibility to deny any adoption. Please Initial _____

Adopter Information

Name: _____ Date: _____

Address: _____

City/State: _____ Zip: _____

Birth date: ____/____/____ Email Address: _____

Home Phone: _____ Cell Phone: _____ Work: _____

1. How long have you lived at the above address? _____
2. How long have you been looking for a cat? _____
3. Do you plan on moving? _____
4. Do you own your own Home? _____ Rent? _____
5. If renting, list landlord's name and phone number: _____

6. Do you live in a House _____ Condo _____ Apt _____ Mobile Home _____
7. Are you currently employed? _____ Occupation? _____
8. Is the cat for you or someone else? _____
9. The reason for the adoption? (Family pet, child's pet, companion for other pet, gift, barn cat, fuzzy child) _____
10. Does everyone know you are adopting or is it a surprise? _____
11. Please list all residents in the house and the ages of children under 18



_____	_____
_____	_____
_____	_____

12. Is anyone in the home allergic to cats? _____
13. Who will be mainly responsible for the cat? _____
14. How many hours will the cat be left alone? _____
15. Where will the cat stay during the day (specifically)? _____
16. Where will the cat stay at night (specifically)? _____
17. Will your cat be allowed on furniture/beds? _____
18. Will your cat have the run of the house? _____
19. How will you handle scratching or destructive behavior? _____



Over

20. Under what circumstances would your cat be kept outside or in the garage or in the basement? _____

21. What, in your opinion are the pros and cons of letting cats go outdoors?

22. Do you currently own any other animals? Yes _____ No _____
If so, please list them and their ages and if they are spayed or neutered.

23. Please list any animals you have owned in the last 10 years.

24. Have you ever had an animal that you have given away? No _____ Yes _____
If yes, please explain _____

25. Please list your current vet and their phone number. _____

26. If this is your first pet, what veterinarian do you plan to use and their phone number.

27. Are you aware that vet care can cost you in excess of \$500.00 per year? _____

28. Are you willing to provide your cat with routine veterinarian care? _____

29. What is your opinion on declawing? _____

30. Under what circumstances would you give your pet away? _____

31. Are you willing to have a representative from Cat Tail Kitties check on the cat?

32. Do you consider your cat to be a member of the family? _____

33. Are you willing to give your cat quality time and attention? _____

34. What type of food do you plan on feeding your cat? _____

35. Would you consider leaving your cat outside unattended? _____

36. Are you concerned about shedding? _____

37. What would you do if your cat did not use the litter box? _____



Approved by: _____ Date: _____