



**APPLICATION FOR ADOPTION
DOG OR PUPPY**

**PLEASE ALLOW AT LEAST ONE HOUR FOR
THE ADOPTION PROCESS TO BE COMPLETED**

Please understand that not all families and dogs are compatible. Every effort is made to match traits exhibited by a dog with characteristics that you desire in a dog. Our goal is to ensure the welfare of the dog only by placement in the best possible home.

To be considered as an adopter you must:

- Be 21 years of age with responsibility for maintaining a household (NO STUDENTS).
- **Have a fenced yard.**
- Have current identification showing address and/or phone number.
- Have knowledge and consent of all adults living in household.
- Agree to provide the pet with an indoor/outdoor home and be willing to consider the companion animal as part of the family.
- Be willing and able to invest the time and money required to provide for the training, medical treatment, and proper care for the dog (Estimated minimum cost annually of a dog is \$500-\$700 per dog).
- Place personal I.D. on the animal as soon as possible.
- Provide an environment that is safe and secure.
- Have the resources to make a non-refundable donation.
- If for any reason the dog has to be “given up” it is to be returned to PPR.

PLEASE COMPLETE THE FOLLOWING

DATE: _____

FIRST NAME: _____ LAST NAME: _____ AGE: _____

SPOUSE'S NAME: _____ AGE: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMPLOYER: _____ OCCUPATION: _____

SPOUSE'S EMPLOYER: _____ SPOUSE'S OCCUPATION: _____

HOME PHONE: _____ WORK PHONE: _____

CELL PHONE: _____ E-MAIL ADDRESS: _____

Please list 3 references (2 family members not living in your home and one non-relative):

1. _____ Phone#: _____
2. _____ Phone#: _____
3. _____ Phone#: _____

How did you hear about PPR?

____ adopted previously from PPR ____ family member ____ friend ____ internet
____ Petfinder ____ Facebook ____ walked into PetSmart ____ other: _____

Number of adults living in household? ____ Number of children: ____ Ages of children: _____

Does anyone have allergies: ____ Yes ____ No Type of allergies: _____

Do you live in a: ____ house ____ condo ____ apartment ____ mobile home ____ townhouse

How long have you lived at your current address? _____

Do you: ____ own ____ rent ____ live with a relative?

If you do not own, do you have your complex/landlord's permission to have a pet? ____ Yes ____ No

Amount of deposit required? ____ Has your deposit been paid? ____ Yes ____ No

What restrictions on size and/ or number of pets apply in your subdivision or apartment complex?

Why did you decide to adopt a dog/puppy? _____

How long have you considered this decision? ____ Do all adults agree to this decision? ____ Yes ____ No

Who will be responsible for the care of this dog/puppy? _____

Where will the dog spend most of its time: __ Inside __ Outside __ Both (if both, how many hours outside ____)

Where will the dog be kept during the day? ____ Night? ____ Vacations? _____

How many hours a day will the dog/puppy be alone? ____ Where? _____

How will you keep the dog be confined? (Mark all that apply) ____ House ____ Kennel ____ Fence
____ Chain ____ Garage ____ Patio ____ Leash ____ Crate ____ Other: _____

If crated or kenneled, how many hours per day? ____ Type and size: _____

Do you have a fenced yard? ____ Yes ____ No What type fence? _____ Height? _____

What size is the yard? Small Medium Large Acreage

Does the yard have any type of shelter for the dog? Yes No What type? _____

If you move in the future, what will you do with the dog? _____

If you had to move to a building where pets are not allowed, what would you do? _____

Do you have the time and effort to allow this dog to adjust to a new home? Yes No

Do you want a dog/puppy for: (mark all that apply)

house pet guard dog child's pet company for other pet hunting dog

companion fighting dog outside dog gift family pet

What breed, preferences, and personality traits are you looking for in a dog/puppy?

Breed: _____ Size: _____ Sex: _____ Color: _____

Hair length: _____ Temperament: _____

Activity Level/Traits: Playful Lap Dog Quiet Laid Back Active

Good with Children Likes Cats

What traits would you consider undesirable? _____

What would you do if the dog demonstrates the following behaviors?

Digging: _____ Chewing _____

Not getting along with other pets: _____

Difficulty adjusting to household: _____

Destructive to personal property: _____

If you had to give the dog up what would you do? _____

If the dog became lost, what would you do? _____

What do you consider a good reason for giving up a dog? (mark all that apply)

Moving Fleas Destructive Biting Grew too big Digging Illness

Chewing Vet Bills Unable to house train Having a baby Barking too much

Allergies Too rough with children Other (please explain): _____

Are you planning to provide obedience training? Yes No If yes, where? _____

Would you consider obedience training to correct undesirable behaviors? Yes No

You will probably have to house train your new pet. Please explain your method of house training.

How often will the dog be exercised? _____ Where? _____

How will you transport the dog? Crate Seat Belt Harness Loose in vehicle Bed of truck

Are you familiar with the leashing and licensing regulations in your area? Yes No

Dogs can often live in excess of 10 years. Are you prepared to assume this responsibility? Yes No

To provide food and medical care for this dog, how much do you anticipate spending yearly? _____

Heartworms are a parasite that is transmitted by mosquitoes to your dog. They live and grow in the heart, eventually producing enough worms that the heart can no longer function. Treating a dog for heartworms is both expensive (\$500-700) and very hard on your dog's system. Heartworms are, however, very easily prevented with a monthly heartworm preventative. Your dog will need to be on preventative for the rest of its' life. Are you willing to commit to this level of care? Yes No

Do we have your permission to periodically check with your vet to ensure that you are keeping your dog on preventive? Yes No

Do you currently have a veterinarian? Yes No If yes, name of vet or clinic: _____

If the dog required surgery or special care, what would you do? _____

Are you familiar with the following canine diseases:

Parvovirus Distemper Bordetella Rabies Heartworms

Are the dogs you currently own on heartworm preventative? Yes No

If yes, what type? _____

Have you ever had a pet die of causes other than those related to old age? Yes No

If yes, please explain: _____

Have you ever returned or given an animal away before? Yes No

If yes, please explain: _____

Please list all animals CURRENTLY owned:

DOG/CAT & BREED	ALTERED: YES/NO	SEX	DATE OF LAST VET VISIT	AGE	INSIDE/OUTSIDE/BOTH

Please list all animals PREVIOUSLY owned (within the last 10 years):

DOG/CAT & BREED	ALTERED: YES/NO	SEX	WHAT HAPPENED TO PET?	AGE	INSIDE/OUTSIDE/BOTH

I certify that the information contained in this application is true. I further understand that any false information may result in denial of the application. This application is the property of PPR and reserves the right to decline any application. This information will not be used for any purpose other than consideration of adoption.

Signature: _____ Date: _____

Signature: _____ Date: _____

