MARION COUNTY ANIMAL SHELTER
PARTNER RESCUE APPLICATION
Complete and return to: marioncountyanimalselter@marionsc.org

GENERAL INFORMATION

1) What is the registered name/s of your rescue: _____

   What is your mailing address: _____

   Website address: _____

   Email address: _____

   Specific animal type you work with (Ie: age/breed, etc.):

2) Who is the primary contact person and phone number:
   List all approved pullers and their contact information including email and phone:

3) What is the physical address to be listed on health certificates and what telephone number do you want listed on tab bands during transport?

4) How long have you been doing rescue?

5) What is your 501©3 Status? If not 501c3, why and do you plan to obtain it?

6) Where do you get the animals that are part of your rescue?

7) Where are your pets kept?
   Volunteer foster home_____   Public Boarding Facility_____
   Veterinary Boarding facility_____   Kennel/shelter facility_____
   Paid foster home_____   Other (Describe)_____

8) Are you in compliance with all licensing laws within your state? If no, why?

9) Are you in good standing with all local shelters? If no, why?

YOUR ADOPTION POLICIES AND PROCEDURES

10) What are your average monthly intake numbers?

11) Do you adopt to out-of-state homes?

12) Do you adopt directly off transports, and if so, please explain:

13) Do you allow same-day adoptions, and if so, please explain:

14) Does your application approval process include a vet reference check and a home visit, even for out of state homes?

15) Are all adults spayed/neutered prior to adoption? If not, why?

16) What is your spay/neuter policy regarding puppies/kittens?

17) What are your adoption fees?

18) Do you accept heartworm positive dogs? If so, what is your treatment method?

19) What is your euthanasia policy and how many animals have you had euthanized?

20) What is your return policy?

21) Are there any special requirements from your rescue that we need to be aware of before sending an animal to you?

22) Which of the following do you utilize to promote adoptions: (Check all that apply)

Petfinder____	Petango____	Website____
Ebay____	Facebook____	Twitter____
Craig's List____	Other (Describe):____	

REFERENCES

23) Please provide references from each of the following:
  a. Primary Veterinarian of your rescue
      Full name:
      Clinic name:
      Address:
      Email address:
      Phone number:

  b. Fellow Rescue:
      Full name:
      Rescue name:
      Address:
      Email address:
      Phone number:

  c. Previous Adopter:
      Full name:
      Phone:
      Email:
      When did they adopt from you and what is the name of the pet:

  d. Shelter you pull from:
      Shelter name:
      Contact name:
      Email address:
      Phone:

  e. A foster we can contact (if you are foster based):
      Name:
      Email:
      Phone number:

  f. If you board animals, please list a facility you use:
      Name:
      Contact name:
      Email address:
      Phone number:

ACKNOWLEDGEMENT

24) Please attach a copy of the following documents:
   a. Adoption application
   b. Adoption contract
   c. Spay/Neuter contract (if applicable)
   d. 501c3 (if applicable)

I certify that my answers are true and complete to the best of my knowledge. If this application leads to approval to pull/transport animals from Marion County Animal Shelter, I understand that false or misleading information in my application or interview may result in my rescue being disqualified from the Marion County Animal Shelter program.

We will never KNOWINGLY send an animal to rescue that we feel may be questionable enough to warrant euthanasia due to behavioral or health issues. It is our belief that ALL animals sent to approved rescue groups will be given EVERY opportunity to be rehabilitated and placed in loving forever homes.

You agree to contact us if your rescue decides it is going to euthanize a Marion County Animal Shelter animal and give us ample time to retrieve this animal if we decide to.

Primary Signature_____
Title_____
Date:

Secondary Signature_____
Title_____
Date: