

Accepted _____

Approved Y / N

Initial _____



Love and life for our four-legged friends!

ADOPTION APPLICATION

Thank you for your interest in adopting a dog with Rosie's Rescue (RR). The purpose of this adoption application is to discover if the dog you are interested in is the best for your family and a compatible match with your life style. Completion of this application does not guarantee adoption of a dog. Please contact Rosie's Rescue prior to completing this application.

If you are interested in fostering to adopt, please speak with the director for more information.

Name of desired dog: _____

Why do you desire this particular dog: _____

Applicant

Applicant's Full Name (First, Middle Initial, Last)

Home Street Address

City

ST Zip

Home Tel

Work Tel

Cel Tel

Age

Personal Email Address

Rosie's Rescue
P. O. Box 1915, Port Hueneme, CA 93044
(805) 330-1401

Employment

What is your employment status?

Employee Self-Employed Retired Unemployed Disability
 Other _____

Company Name

Title

Occupation

Company Street Address; City, St, Zip

Office Tel

Work Email

Animal

How would you rate your level of dog handling experience?

First time Owner Intermediate Advanced Other
Describe level of experience _____

What are your primary reason for wanting a dog?

Companion dog For the Kids Gift For other pet Watch dog
 Other _____

Do you know how to house train a dog? Yes No

If yes, describe method you use: _____

What is the preferred level of exercise with the dog?

Couch potato Short walks Long walks Vigorous walks Hike or jog
 Other _____

Have you ever allowed a dog to breed? Yes No

How often will the dog be exercised? Weekly Daily None

Other _____

Where will the dog stay when he/she is home alone with no humans at home?

Dog crate Run of the house Backyard Outdoor dog run Kitchen
 Bedroom Bathroom Laundry room Garage Patio
 Other _____

Do you have pet(s) now? Yes No

If yes, list all of the animals at your home. Use additional sheet if needed:

Name	Breed	Age	Sex	Altered
_____	_____	_____	M/F	Y/N
_____	_____	_____	M/F	Y/N
_____	_____	_____	M/F	Y/N
_____	_____	_____	M/F	Y/N

When will the dog be inside? _____

When will the dog be outside? _____

How many hours during each day of the week will the animal be left alone at home?

Sunday Monday Tuesday Wednesday Thursday Friday Saturday

Comments: _____

Where will the dog sleep at night?

- Dog house Garage Kitchen Crate Patio
 Laundry Room Backyard Spare Room Master Bedroom Bathroom
 Anywhere in the house Other _____

What outside areas are available to the dog to roam freely?

- Fenced backyard Enclosed patio Dog house Garage
 Unfenced common area Fenced front yard Unfenced outside area
 Other _____

What rooms are off limits to the dog? _____

When you go on vacation, who will care for the dog?

- Friend Family Pet sitter Neighbor
 Boarding facility, provide name and city _____
 Other _____

What kind of food will you feed the dog?

- Brand of dog food _____ Can food Dry Kibble
 Other _____

Will your dog wear a collar? Yes No

If yes, when? _____

How would you discipline your dog if he or she misbehaves? _____

How will you train this dog? (Check all that apply)

- Firm verbal commands Hit with newspaper Obedience class Hire trainer
 Clicker/hand signals No training is needed Other _____

If the dog begins to exhibit some behavioral issues, are you willing to hire and work with a behaviorist/trainer to help your dog correct the behavior? Yes No
 Other _____

How do you normally walk your dog? On leash Off leash
 Other _____

When on leash do you normally use:
 Collar only Choke chain Martingale collar Harness Pinch collar
 Other _____

Do you plan to take the dog to dog parks? Yes No
 Other _____

Are you able to make a long-term commitment to care for your pet for its entire life span, which could be as much as 10 to 20 years? Yes No

Are you willing to live with hair on the furniture, chewing of personal items, stains on your floors, indoor mistakes, digging, excessive barking, crying and any other damages that a dog may create? Yes No

Pets are an investment of your time and money. Can you afford to provide medical care, grooming, healthy diet, comfortable shelter and exercise for your new dog? Yes No

What would happen to your pets if you moved?
Locally? _____
Out of state? _____
Out of the country? _____

Which of the following reasons might prompt you to give up your dog? (Check all that apply)
 Excessive barking Bite people Digging Job relocation Growling at guests
 Poor watch dog Shedding Divorce Allergies Aggressive on leash
 Dog cannot learn to house train Excessive vet bills Bite other animals
 Occasional accidents indoors Having a Newborn child Excessive energy
 New spouse/partner does not like dogs Destructive chewing Financial problems
 Other _____

List all the animals you have had in the past as an adult and the length of time together. If they are no longer with you, please provide an explanation. Use additional sheet, if needed:

Name/Breed	Age	Period together	Comments
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever turned your dog into the shelter? Yes No
If yes, describe why: _____

Puppy

Only complete this section if you are interested in adopting a puppy under six months of age.

Do you have previous experience taking care of a puppy? Yes No

If yes, describe: _____

Family

List all occupants in your home:

Full Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Does everyone in the household want to adopt this dog? Yes No

If not everyone, who is not wanting to adopt? _____

Does anyone in your household, including yourself, have animal allergies? Yes No

If yes, describe? _____

Do you have illness, mental or physical disabilities that may affect your ability to fully care for the dog?

Yes No If yes, describe _____

Are you taking any drugs or medicines that may affect your ability to fully care for the animal?

Yes No If yes, describe _____

Does anyone, including you, smoke cigarettes, cigars, or tobacco in the house? Yes No Occasionally

What do you like to do during your spare time? _____

Home Residence

Type of dwelling:

House Condo Apartment Town Home Mobile Home

Is there a swimming pool on the property? Yes No

If yes, does the swimming pool have a perimeter fence? Yes No

Do you rent or own? Rent Own Live with parents or relatives

How long have you been living at this address? _____

Renting

Do you have your landlord's permission to have a dog? Yes No

Are there any physical limits on the size and breed of the dog you can have? Yes No

Landlord's name and phone number: _____

Backyard

Only complete this section if you have a backyard.

What type of fencing do you have? Check all that apply

Chain Link Wood Concrete wall Wrought iron Stucco wall

No fencing Other _____

What is the condition of the fencing? Excellent Good Fair Poor

What kind of ground surface area is right below the fencing? Dirt Concrete Wood Other _____

Are you willing to make any necessary repairs or improvements to create safety and security for the new dog?

Yes No

Are there any gates? Yes No Does the gates have locks? Yes No

Who has access to your yard? Gardener Pool man Utility worker Neighbor No one

Do you have a doggie door? Yes No

Other Info

Would you consider being a foster in the future? Yes No Maybe

How did you find out about the dog?

Friend/Family Poster/flyer Craigslist Previous adopter Email

Pet adoption Event Internet, specify _____

Have you adopted from other rescue organizations or shelters before? Yes No

If yes, list from where _____

Additional comments and info you would like to provide: _____

All adult dogs adopted are spayed/neutered, current on DHLPP and rabies vaccines.

If you are adopting a puppy, he/she will be current on the vaccines and be micro-chipped. If the puppy is under six months of age, the adopter will be responsible to pay for the spay/neuter surgery and will have a veterinarian perform the surgery as soon as the puppy is old enough to undergo the surgery.

INITIAL All prospective applicants will be required to have a home visit completed by a RR member to ensure that the home is a safe and secure environment for the animal.

INITIAL A minimum \$150 adoption fee is required and is tax deductible. Any amount above the required amount is greatly appreciated and will help to rescue, provide medical care, spay/neuter, board and place other animals.

By your application, RR will add your personal email address to our email distribution list. The email distribution list is used ONLY to notify you of animals in need of adoption or fostering, special events or general announcements

Check here if you **DO NOT** want to be placed on the distribution list. Checking here will not affect your application.

I certify this application has been completed with integrity and accuracy to the best of my knowledge. I hereby agree that if for any reason the adoption is not successful, the dog will be returned to Rosie's Rescue. Donations are non-refundable, but can be applied to another dog in the future.

Application Agreed and Acknowledged:

Signature

Date

Print Name

Upon completion of this application, please mail or email to:
Rosie's Rescue
P. O. Box 1915
Port Hueneme, CA 93044
Email: director@rosiesrescue.org



Love and life for our four-legged friends!

a 501(c)(3) non-profit