



Homeward Bound Animal Shelter
Manistee County Humane Society
736 Paws Trail, PO Box 144
Manistee, MI. 49660
231-723-7387

Email: manisteehumanesociety@gmail.com
Website: www.homewardboundmanistee.org

Dog Adoption Application/Questionnaire

It is our policy to make certain that each person who adopts a dog is aware of the responsibilities of pet guardianship, and is capable of and willing to accept those responsibilities morally, physically and financially. Not every person who desires to adopt a dog should do so.

By completing this questionnaire, you will aid us in determining if you and your family are indeed ready for a pet guardianship, and if the dog of your interest would suit you and your lifestyle. Should you agree that adopting a pet is a commitment throughout the lifetime of your companion animal, please fill out the questionnaire.

Dog of interest: _____

Personal Information

Name: _____ Age: _____

Name of Spouse, Partner, Roommate: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Number: _____ Circle one: Home – Cell – Work

Email: _____ Other contact number: _____

Occupation: You - _____ Spouse: _____

Work Schedule: You - _____ Spouse: _____

Name of all persons living in your household, their relationship to you and their ages:

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

YOUR COMPANION ANIMALS

Do you presently have a dog: Yes No Have you previously had a dog: Yes No

If you presently have or had dogs in the past, please complete the questions below.

Current Dog(s)

Name & Breed	Age	Sex	Altered?	How Obtained? Adopted, purchased, etc.	How long

Previous Dog(s)

For “what happened” briefly describe the circumstances. (Examples- gave away, sold, died and cause of death, took to shelter etc.)

Breed	Age at Death	Sex	Altered?	What Happened?	What Year

Have any of your dogs ever had puppies? Yes No

If yes, you breed for Fun Profit Show Accident

Has any member of your family ever experienced animal related allergies: Yes No

Have you ever trained a dog in obedience classes? Yes No

Have you ever trained a dog? Basic Commands Herd Hunt Guard/Attack Other

If you have other pets, please complete the following chart.

Species	How many	Ages	Kept where	Since what year	If a cat, is it declawed? If yes, why?

Your Family Veterinarian:

Name: _____ Phone: _____

YOUR NEW DOG

1. Who would be responsible for the care of the dog? _____
2. What is your primary reason for adopting a dog?
 Companion Guard dog Fighting Hunting Attack dog Other
If Companion, whose?
 You Spouse Children Another pet Someone else (Who?) _____
3. Where would the dog sleep? Inside (where?) _____ Outside (where?) _____
4. How many hours per day would the dog be left alone: _____
5. Where would the dog be left when he/she is alone? Indoors Outdoors
If outdoors: Yard Patio Kennel Garage Other
If yard: Do you have a doggie door? Yes No
6. Do you intend to hire a dogsitter or take the dog to the daycare center? Yes No
7. When you're at home, the dog would be: indoors • outdoors • other (where!)

8. Which rooms or areas of the home/yard will be off-limits to the dog: _____
9. Do you allow dogs on furniture? Yes No Some (which?) _____
10. If the dog will be outside at all, what outside space is available for the dog:
 Fenced yard Patio Run Chained or cable Balcony Unfenced yard
 Other: _____ Are the gates: Latched Padlocked Other: _____
11. How do you plan to handle dog's exercise needs: _____

12. Do you feel obedience training makes a dog a better companion? Yes No
13. If necessary, would you be willing to attend obedience classes at your own expense?
 Yes No
14. Do you travel a great deal? Yes No
If yes, How often? _____ How long at a time? _____
15. When you do travel, how do you intend to provide for the dog while you are gone?

16. What provisions would be made for the dog if you had to move to:
Locally: _____ Out of state: _____
To a place where no pets are allowed _____
17. Under what circumstances would you not keep the dog?
 Divorce Illness in family Moving New baby New job Housetraining
 Chewing Barking Digging Allergy Shedding too much Dog grew too big
 Dog became ill Kids ignore the dog Pets didn't get along Not obedient enough
 Other (explain) _____ Would not give up for any of the above
18. What would you do if the dog grew to be bigger than you expected?
 Return the dog to rescue Take the dog to shelter Keep the dog outside
 Other (explain) _____ Nothing

19. If the dog becomes destructive at your home, what would you do? _____
20. If the dog has "accidents" at your home, what would you do? _____
21. If the dog shows Separation Anxiety, what would you do? _____
22. If the dog becomes aggressive to people and/or dogs, what would you do?
 People Aggression: _____
 Dog Aggression: _____
23. If the dog becomes ill or injured, are you financially prepared to provide the medical care?
 Yes No
 If yes, is there a maximum amount you would spend for your dog's medical needs?
 Cash amount \$ _____ Reason: _____
24. The dog may live 15+ years, what would you do with your dog if you could no longer care for the him/her _____
- Is there anything else you would like to tell us about yourself?

Application Information: All the information I have provided in this questionnaire is true and correct to the best of my knowledge. If any of the information changes, I will advise you promptly.

Signature: _____ Date: _____

Print Name: _____

Please list two personal references and their relationship to you:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____