



ADOPTION APPLICATION

Please print:

Last Name: _____ First Name: _____

Spouse / Partner Last Name _____ First Name _____

Address: _____ City: _____ State: ____ Zip: _____

Home Phone: _____ Cell or Other Phone: _____

Driver's License #: _____ State: _____

Do you: Own Rent Live with parents

If Rent: Landlord name and phone: _____

Is your residence a: House Apartment Condo/townhouse Mobile home Dormitory

How long have you lived at this address? _____ How many adults live there? (18 years and older) _____

How many children live there full time? _____ Part time? _____ Ages: _____

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What is your reason for getting an animal? _____

Who will be the primary person responsible for the new pet? _____

Are you willing to take responsibility for the next 10 years or more? Yes No Explain _____

How much do you estimate it will cost to care for your new pet for one year (food, vet, etc.)? _____

Does anybody in your home have allergies to animals? Yes No If so, to what? _____

Do you: Work full time Work part time Attend school Retired Other: _____

Does your spouse/partner: Work full time Work part time Attend school Retired Other: _____

How many hours per day will your pet be home alone? _____

Where will you keep your pet when no one is home? _____

Where will your pet be during the day? _____ At night? _____

What will you do with your pet if you need to travel? _____

If you move, what will you do with your pet? _____

Pets need time to adjust to a new home. How much time are you willing to give your new pet to adjust? _____

What would be unacceptable behavior which would cause you to give up your pet? _____



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Do you have any animals in your home now? Yes No If so, please list them below:

Type	Breed	Age	Sex	Spayed/ Neutered?	Kept Where	Any behavioral concerns

Who is your veterinary? _____

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If you don't have animals now, have you in the past? No Dog Cat Other _____

How long did you have your last animal? _____

What happened to your last animal? _____

Have you ever had an animal die at an early age, or die due to an accident? Yes No If so, what happened to it?

Have you ever adopted from the Gunnison Valley Animal Welfare League before? Yes No

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How did you hear about our organization? Friend Newspaper Website Petfinder Other: _____

Why do you want to adopt from the Animal Welfare League? _____

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COMPLETE IF LOOKING TO ADOPT A DOG:

Do you plan on allowing the dog off the leash? Yes No If so, where? _____

Are you willing to crate train the dog if necessary? Yes No

How will you obedience-train you dog? _____

Do you have a fenced in backyard? Yes No If so, what height and type of fence? _____



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How do you plan to exercise your new pet?

COMPLETE IF LOOKING TO ADOPT A CAT:

What will you do if your new cat starts scratching furniture? _____

How often will you let your cat be outside? _____

What will you do if your cat stops using the litter box? _____

Would you like assistance in introducing a new cat to your current animal(s)? Yes No

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SIGNATURE

Please give careful consideration to adopting an animal. Animals are not toys or short term commitments.

Make sure your lifestyle allows the time, patience, and expense this animal will need over the years.

Signature: _____

Date: _____

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FOR OFFICE USE ONLY

Interview by: _____

Approved Denied

Restrictions: _____

Landlord name & phone: _____

Comments: _____
