



**Dog Adoption Application**  
(All applications MUST be filled out completely)

Name _____	Home Phone _____	
Address _____	Work Phone _____	
City _____	State _____	Zip _____
Email address _____	Occupation _____	

Dog you are applying for: \_\_\_\_\_

1. What type of dog are you interested in?

Sex  M  F      Age \_\_\_\_\_      Color \_\_\_\_\_      Hair length \_\_\_\_\_  
Breed \_\_\_\_\_

2. Please indicate why you are interested in adopting a dog (Check all that apply):

Family Pet     Child's Pet     Companion for Self     Guard Dog     Gift  
 Companion for other Pet     Other \_\_\_\_\_

3. Will anyone in your household be surprised by the adoption of this dog?  Yes  No

If yes, who will it be and why? \_\_\_\_\_

4. Is anyone in your house allergic to dogs?  Yes     No

If yes, what steps will you take to accommodate the dog and the household member?  
\_\_\_\_\_

5. How many adults live in the household? \_\_\_\_\_

6. Do any children live in your household?  Yes  No

If yes, please list the number of children in the home and the age of each child.  
\_\_\_\_\_

7. Who will be primarily responsible for the daily care of this dog?  
\_\_\_\_\_

8. How will you exercise your dog?  
\_\_\_\_\_

9. How will you handle interaction between this dog and your children?  
\_\_\_\_\_

10. How much interaction will members of your household have with the dog?

\_\_\_\_\_

11. How many hours a day will the dog be alone? \_\_\_\_\_

12. When home alone, where will the dog stay? (Check all that apply)

- Garage  Basement  Run of the house  Outdoors  One room of the house  
 Crate  Other \_\_\_\_\_

13. Where will the dog sleep at night? (Check all that apply)

- Garage  Basement  Run of the house  Outdoors  One room of the house  
 Crate  Other \_\_\_\_\_

14. How will you handle house training/problems if they occur?

\_\_\_\_\_

15. How will you handle chewing and/or destruction if they occur?

\_\_\_\_\_

16. Have you ever had behavioral problems with a pet?  Yes  No

If yes, please describe the problem and how you handled it.

\_\_\_\_\_

What pets do you currently have?

Name	Type (dog, cat)	Age	Spayed/Neutered	Vet they see & phone number	Current on vaccinations?

What pets have you had in the last 5 years?

Name	Type (dog, cat)	Vet they saw	Phone number	What happened to the pet?

17. Do you plan on using a different vet for this new dog?  Yes  No

If yes, why? \_\_\_\_\_

18. How much do you expect to pay annually for pet care (vet, medicine, food, toys, etc)?

\_\_\_\_\_

19. What percentage of the time will the dog live indoor? \_\_\_\_\_%

20. Do you have a pet door?  Yes  No

21. Would you purchase and use a crate if necessary for this dog?  Yes  No

22. Will you take obedience training?  Yes  No  Not sure

23. Under what circumstances might you consider giving up your dog?

Moving  Baby  Separation/Divorce  Behavior problems

Medical problems  Children lost interest  Time consuming  Allergies

Biting  Barking  House breaking problems  Not getting along with other pets  Other

24. Have you ever given up a pet in the past?  Yes  No

If yes, please describe what happened

25. What will happen to the dog if you move? \_\_\_\_\_

26. Please check where you live:

Apartment  Condo  Townhouse  Mobile home  Single family home

Do you have a fence?  Yes  No If yes, how tall is the fence? \_\_\_\_\_

Is the fence completely around the yard?  Yes  No

Do you rent?  Yes  No If yes, does your landlord allow pets?  Yes  No

If yes, what type of pets do they allow? \_\_\_\_\_

Is there a size or weight restriction?  Yes  No  NA

Is there a number limit?  Yes  No  NA

Please list the name and phone number of the landlord: \_\_\_\_\_

27. How long have you lived in your current residence? \_\_\_\_\_

28. How often have you moved in the last five years? \_\_\_\_\_

29. Do the primary caregivers of the animal travel often?  Yes  No

30. When traveling, who will take care of the pet? \_\_\_\_\_

31. Are you willing to allow a CARA representative visit your home by appointment?  Yes  
 No

Please list references that are familiar with your life style(one that is a relative, two that are not related)

Name	Address	Telephone Number

Are you aware that there is an adoption fee involved?  Yes  No

By signing below, I am attesting to the truthfulness of my answers. Falsification of any of the above information will be grounds for rejection of this application and possible removal of adopted dog from my home. I consent to CARA representatives discussing information on this application with any persons named on this application. Applicant must be 18 years or older. CARA reserves the right to refuse any applicant for any reason. All completed applications become property of CARA.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICIAL USE ONLY:

Interviewed by : \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Application approved: \_\_\_\_\_ Date: \_\_\_\_\_  
 Foster Signature

Application declined: \_\_\_\_\_ Date: \_\_\_\_\_  
 Reason for decline  
 \_\_\_\_\_  
 Foster Signature

Required for all applications \_\_\_\_\_ Date: \_\_\_\_\_  
 Dog Coordinator Signature