

THIS SECTION FOR OFFICE USE ONLY

Screener: _____ Date: _____

Results: Did Not Adopt OR Did Adopt

Dog's name: _____ Dog's ID #: _____

Pet Adoption Form

PreQualification

ALL PROSPECTIVE ADOPTERS MUST:

- Be 21 years of age and have a valid ID with a verifiable current permanent address and verifiable phone number.
- Ensure that the head of household and all other adults living in the household have consented to the adoption.
- Bring all children and family members to meet the dog and We Care Animal Rescue representative before the adoption.
- Have the financial ability to pay the adoption fee and ongoing expenses to care for dog, including routine and emergency veterinary care, grooming, and training.
- Make a commitment to properly and humanely obedience train the dog, enrolling the dog in classes or hiring a professional trainer if necessary to address specific behavior problems or issues.
- Ensure that dogs are allowed in rented housing. Renters must show copy of lease or other proof from landlord that the dog is allowed.
- Fill out the Adoption Application, and understand that the application has to be approved and that the approval process may take 24-48 hrs. or longer. We know you're anxious to adopt your new pet, but to ensure a good match it may take a few days to process your application. Please be patient – we want to make sure that you and your new pet are compatible and will have many years together!

If you do not agree to all of the above conditions, please discuss the adoption process with our staff before proceeding.

PLEASE NOTE: 100% of the adoption fee is refunded if the pet is returned in six months and 50% thereafter for the life of the pet. Pets can be brought back regardless of room, time, health. However, no refunds are given if the pet is taken back due to breach of contract.

Part of our adoption requirement is to feed Life's Abundance and/or other holistic or natural pet foods based upon what our veterinarian, Dr. Alinovi recommends for each individual pet. Part of keeping a healthy pet is proper nutrition. Proper nutrition can eliminate health issues, allergies, yeasty ears, skin & disease conditions, seizures and save the pet owner money and the pet from unnecessary illnesses caused by harmful additives, by products, corn and wheat found in most other pet foods. Feeding right just makes sense for a healthier pet!

HOW TO START THE ADOPTION PROCESS:

Please fill out Application and fax to 815-682-4484. An Adoption Screener will contact you for a phone interview or follow-up.

PLEASE READ CAREFULLY AND MAKE SURE THE APPLICATION IS FILLED OUT LEGIBLY, IN DARK PEN OR TYPED, AND IN ITS ENTIRETY. INCOMPLETE OR ILLEGIBLE APPLICATIONS WILL NOT BE CONSIDERED

IMPORTANT NOTE: PLEASE REALIZE THERE MAY BE APPLICATIONS ALREADY PENDING ON THE DOG OR PUPPY THAT YOU'VE SET YOUR HEART ON. APPLICATIONS ARE GENERALLY CONSIDERED ON A FIRST-COME FIRST-SERVED BASIS, BUT IN THE EVENT THERE ARE MULTIPLE APPLICATIONS ON THE SAME ANIMAL WE RESERVE THE RIGHT TO SELECT THE HOME THAT WE FEEL BEST SUITS THAT PARTICULAR ANIMAL.

Thank you for taking the time to complete this questionnaire.

Your answers will permit us to more effectively meet your needs and the needs of our dogs. Our goal is to match each adopter with the dog that will best fit into his/her lifestyle to ensure the dog's best chance at a forever home. Please understand that our first obligation is to the welfare of our animals. It is our responsibility to find permanent loving homes for each of them. Therefore, we have adoption guidelines in place and we reserve the right to deny any adoption we feel is unsuitable. If your application is preliminarily approved, you will be called to arrange to meet the dog you're interested in or to pick up the dog that you've already met and decided on. Final approval rests with the foster parent. Upon picking up the dog, you will be expected to bring with you: (please initial each item as read and understood):

- _____ an appropriately sized collar with attached ID tag showing your address and phone number
- _____ an appropriately sized choke chain, prong collar, harness or gentle leader as specified for dog
- _____ a leash
- _____ personal picture ID (such as a driver's license) and ID showing your current address
- _____ cash or check for adoption fee. We do not take credit cards

Please check appropriate box(es):

- I have already spoken on the phone to an Adoption Screener.
If so, please fill in screener's name: _____
- I left a message on We Care Animal Rescue voice mail but have not yet received a call back.
Date called: _____
- This is my first contact with We Care. I have not left a voice mail nor spoken with anyone yet.
- I have adopted from We Care Animal Rescue in the past. When? _____
Pet's name & ID#: _____

When were you hoping to adopt?

- Immediately Next few days
- Next few weeks Next few months

CONTACT INFORMATION

Primary Applicant's Name: (First-Middle-Last) _____ Age: _____
Home phone: _____ Work: _____ Cell: _____
Co- Applicant's Name: (First-Middle-Last) _____ Age: _____
Relationship: _____ Work: _____ Cell: _____
Email 1: _____ Email 2: _____
Address: _____ Apt #: _____
City: _____ State: _____ Zip: _____

FAMILY DYNAMICS

of adults in household: _____ Relationship to Primary applicant: _____
of children in household: _____ Ages of girls: _____ Ages of boys: _____

Do you expect your current family situation to change?

If yes, how? _____

Has anyone in the household ever been convicted of domestic battery, animal cruelty or a violent crime? Yes No

If yes, please provide details: _____

Are you willing to let an We Care representative visit your home before and/or after adoption? Yes No

Does everyone in the household wish to adopt a pet? Yes No If not, who does not? _____

Does anyone in the household have an allergy to dogs? Yes No If yes, who? _____

If so, how will you handle the situation? _____

If your new boyfriend/girlfriend is allergic to the pet, how will you handle it? _____

If there were a new baby in the house, what would happen to your dog? _____

HOUSING

Do you: (Check One) Own Rent Live with relatives
 Do you live in a: (Check One) Home Apartment Condo Townhouse Mobile home Dorm
 Other _____

How long at current address? _____ years How long at previous address? _____

If less than 2 yrs., what was your Previous Address?

Street Address: _____ Apt # _____ City _____ State _____ Zip _____

If you rent: (if you do not rent go to next section)

Does your lease allow dogs? Yes No How many dogs? ____ What restrictions apply? _____

Name of Landlord: _____ Phone: _____

If you live in a condo/townhome: (if you do not live in a condo or townhome go to next section)

Does association allow dogs? Yes No How many dogs? ____ What restrictions apply? _____

Name of condo/townhouse property manager: _____ Phone: _____

When outside, where will dog be? (check all that apply)

- Leash walked Dog run Dog house
 Tied/chained on porch Tied/chained in fenced yard Tied/chained in unfenced yard
 Loose in unfenced yard Loose in fenced yard

If you have a fenced yard, describe type and height of fence: _____

Do you plan to move in the foreseeable future? Yes No If yes, when? _____

If yes, what type of housing will you be moving into? _____

If you ever moved into a building that did not allow pets, what would you do with your dog? _____

If you moved out of state, what would you do with your dog? _____

If you died or became incapacitated or other unforeseen circumstances arose in your life where you were unable to keep your dog, is there a back-up person you have made arrangements with to take your dog? Yes No

If yes, name of person: _____ Relation: _____ Phone: _____

If no, what would happen to your dog? _____

AVAILABILITY

How often do you travel?

How will you provide for your dog when you travel?

Does **applicant**: Work full-time? Work part-time? Attend school? Retired?

Does **co-applicant**: Work full-time? Work part-time? Attend school? Retired?

Does anyone in the household a stay at home person? Yes No

If yes, who? _____ If no, how many hours will dog be left alone? _____

Where will your dog be when you're home: _____ you're not home: _____ you're asleep _____

Will your dog generally be kept: Inside Outside Inside/outside

How many hours a day will your dog be outside? _____

CURRENT AND PAST PETS

Please tell us about your most recent (current and past) pets:

TYPE Dog, cat, rabbit etc	BREED/SIZE	GENDER	AGE	SPAYED/ NEUTERED	STILL OWN?	IF NO, WHERE IS PET NOW?

Are your current dogs: Indoor Outdoor Indoor/Outdoor Explain: _____
 Are your current cats: Indoor Outdoor Indoor/Outdoor Explain: _____
 Are your current dogs heartworm tested annually? Yes / No Kept on heartworm prevention? Yes / No
 Have you ever had a pet: Lost? Yes / No Stolen? Yes / No
 Hit by a car? Yes / No Have you ever had to give up a pet? Yes / No

If yes, what were the circumstances? _____

If given up, what did you do with it? _____

Have you ever adopted from a shelter/rescue organization? Yes / No

If yes, which shelter/rescue? _____

Have you recently applied to adopt from another shelter/rescue organization? Yes / No

If yes, which shelter(s)? _____

Shelter: _____ Date: _____

Status: _____ Reason for not adopting: _____

PET OWNERSHIP

Do you agree to spay/neuter your dog (at our expense) if not already done? Yes / No

Who will be primarily responsible for:

_____ Feeding the dog _____ Grooming the dog _____ Pooper scooper

_____ Walking the dog _____ Training the dog _____ Vet visits

Do you have experience with dog training? Yes No If yes, please describe: _____

How do you plan to discipline the dog? _____

Are you willing to attend obedience classes and/or hire a trainer at your own expense? Yes / No

Do you plan to attend obedience classes or hire a trainer for your new dog? Yes / No

Have you already looked into training programs in your area and decided which one you will use? Yes / No

Do you own a training crate? Yes / No Size: _____

If no, are you willing to buy one? Yes / No

Which of the following dog behaviors/characteristics present a problem for you? (mark all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Jumping on furniture/counters | <input type="checkbox"/> Jumping an (indoor) fence | <input type="checkbox"/> Jumping on people |
| <input type="checkbox"/> Chewing on shoes/furniture | <input type="checkbox"/> Playful nipping or mouthiness | <input type="checkbox"/> Barking/howling |
| <input type="checkbox"/> Guarding | <input type="checkbox"/> Digging | <input type="checkbox"/> Shedding |

How will you resolve this problem? _____

How often do you plan to vaccinate your dog? _____

If your dog developed a medical condition that cost more than \$500 to treat, what would you do? _____

How much do you expect to spend for maintenance for your dog in a year? _____

How much time are you prepared to allow for your new dog to adjust to your home? _____

What is your anticipated level of exercise with the dog?

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Couch Potato | <input type="checkbox"/> Yard Exercise | <input type="checkbox"/> Short Walks |
| <input type="checkbox"/> Vigorous Walks | <input type="checkbox"/> Hiking/Jogging | <input type="checkbox"/> Dog Parks |

Based on your lifestyle, what level of sociability and outside exposure do you anticipate your dog will have?

- | | | |
|---|--|---|
| <input type="checkbox"/> Dog rarely leaves home | <input type="checkbox"/> Walks around the neighborhood | <input type="checkbox"/> Regular visits to dog park |
| <input type="checkbox"/> Regular visits to doggie daycare | <input type="checkbox"/> Dog goes everywhere with me | <input type="checkbox"/> Dog goes along on family trips |

DOG OF INTEREST

Why do you want to adopt a dog? (check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Companion for me | <input type="checkbox"/> Family pet | <input type="checkbox"/> Gift or surprise |
| <input type="checkbox"/> For a child | <input type="checkbox"/> To breed | <input type="checkbox"/> Watch dog |
| <input type="checkbox"/> Companion for another pet | <input type="checkbox"/> Other - Explain: _____ | |

What characteristics are most important to you when considering which dog you'll adopt? (check all that apply)

- | | | | |
|---|---|--|--------------------------------------|
| <input type="checkbox"/> Good with large dogs | <input type="checkbox"/> Good with small dogs | <input type="checkbox"/> Obedience trained | <input type="checkbox"/> Housebroken |
| <input type="checkbox"/> Good with cats | <input type="checkbox"/> Friendly/well socialized | <input type="checkbox"/> Good with kids | <input type="checkbox"/> Male |
| <input type="checkbox"/> Female | <input type="checkbox"/> Long hair | <input type="checkbox"/> Short hair | <input type="checkbox"/> Non-shed |

Age Range: _____ Breed or type: _____ Size: _____ Color: _____

