

Canine Adoption Profile

Please be advised by filling out this application you are not obligated to adopt.
Completing this profile is not a guarantee that you will be allowed to adopt a pet at this time.

Date: _____ Name: _____ Driver's License: _____

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

Email: _____ Phone #1: _____ Phone #2: _____

Date of birth: _____ Length of time living at address: _____

Do you: Own Rent Apartment Rent House Live with Parents Other:

Landlord Name and Phone: _____

Known rental restrictions/conditions: Weight Breed Other:

Are you: Employed Unemployed Retired Student Name of Employer: _____

Are you or anyone in your household allergic to cats or dogs? Yes No How many people live in your house?

Are there children in your home? Yes No Ages of Children: 0-2 3-6 7-10 11+

Co-Applicant: _____ Relationship: _____

Email: _____ Phone: _____ Employer: _____

Age: 18 or under 19 – 20 21 – 54 55+ Employed Unemployed Retired Student

Dog Experience:
 First-time owner
 Have had one or two dogs
 Dog expert!

Time Away from Home:
 Home all day
 Home part-time
 Away 7-10 hours daily
 Away longer than 10 hours
 Can bring dog to work

Our Dog Will:
 Live indoors only
 Go indoors/outdoors
 Live outdoors only

Containment:
 Fenced-in yard
 Invisible fencing
 Cable/tie out
 Leash walking
 Free roam on property
 Other:

How much do you anticipate spending yearly to provide food and medical care for your new dog?
 Less than \$200
 \$200 - \$400
 \$400 - \$600
 \$600+

Where will your dog spend its time alone? (check all that apply)
 Inside Outside Both
 Crate Other:

Home Atmosphere:
 Busy! Lots of Activity/Noise
 Moderate, some visitors
 Quiet and Serene

Current Veterinarian/Clinic(s): _____

Vet Location City: _____

Current Pets in Home

Type: _____
 Name: _____
 Age: Male Female
 Spayed/Neutered Yes No
 Kept: Inside Outside Both
 How long have you had this pet?

Type: _____
 Name: _____
 Age: Male Female
 Spayed/Neutered Yes No
 Kept: Inside Outside Both
 How long have you had this pet?

Type: _____
 Name: _____
 Age: Male Female
 Spayed/Neutered Yes No
 Kept: Inside Outside Both
 How long have you had this pet?

Name(s) of dogs you are interested in adopting from our facility _____

Please list any additional pets that have been in your care the past eight years (include all exotic pets):

Name/Type of Animal Breed Years Owned Spayed/ Neutered Inside/Outside Where is pet now?

Have you ever had to find a new home for one of your pets, or surrender a pet to a shelter or animal control?

Yes No If yes, please explain:

What will you do with your dog when you go on vacation?

If you have to move, what would you do with your dog?

In the case of personal illness, who will provide care for your dog?

What do you think will be the hardest part of having a new dog?

Under what circumstances would you need to return your dog to ECHS?

Will your dog be on heartworm prevention?

How much time will you give your dog to adjust to your home?

What qualities would you like in a dog?

What qualities do you NOT want in the dog you adopt?

How will you exercise your dog?

How often?

Have you ever taken a dog to obedience class? Yes No Will you take your new dog to obedience class? Yes No

Do you understand that Eaton County Humane Society does not guarantee the health of its animals and that additional medical care at your personal expense may be necessary? Yes No

Personal References (non-family members)

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

I have seriously considered all aspects of owning a pet and I am aware of the time and money involved. I am prepared to make a commitment to the pet being adopted for its lifetime. ECHS has the right and responsibility to assist me in selecting a pet that is well suited to me and my lifestyle. I certify that the answers on this profile are accurate and understand that false information will result in nullifying the adoption. I understand that this questionnaire remains the property of the Eaton County Humane Society.

Signature _____

Date _____

For ECHS use only:

Approved by: _____ Issues Discussed: _____

Denied by: _____ Reasons Denied: _____