**ADOPTION APPLICATION**

 **TODAY’S DATE:**

**WHAT ANIMAL ARE YOU APPLYING FOR:**

*Welcome to the ANNA Shelter. We are glad you have come to adopt a new pet from our shelter. In order to be considered as an adopter today, you must: • Be 21 years of age or older; • Have identification showing your present address; • Have the consent of your landlord (if applicable); • Be able and willing to spend the time, money and provide the necessary training, medical treatment, and proper care for a pet. The adoption of a lifelong animal friend should not be impulsive, but a carefully thought out decision, which will ensure a loving, lasting, FOREVER relationship. This process may take over an hour or if information needs to be verified several days. We do require a meet and greet if you have a current dog in the home.*

**You are applying for a minimum commitment of 10-15 years.**

**Are you willing to make the investment in time, finances and training (average $1000 annually) to care for and properly manage your new pet?**

**⇯YES ⇯NO**

**Basic Information**

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STREET ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_WORK/CELL PHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BIRTHDATE:: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Are you a student: ⇰Yes ⇱No

**Housing Information**

Do you own your home? ⇰Yes ⇯No *(Home Ownership will be verified)* How Long? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of home: ⇸Single Family ⇯ Trailer ⇯Apt./Townhome/Condo ⇯Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you rent, please provide your landlord’s contact information below *(Your landlord will be contacted.)*

Name/ Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your lease require a pet deposit: ⇸Yes ⇯No

If yes, have you paid that deposit *(proof may be necessary)* ⇮Yes ⇮ No

**Household information:**

# of adults \_\_\_\_\_\_\_\_\_ Do all adults know that you plan to adopt a pet?  Yes ⇬No

#Children \_\_\_\_\_ Children’s ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is the primary applicant employed?

 Yes  Name of Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Length of Employment:\_\_\_\_\_\_\_\_

⇬No Explain the primary source of income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE CONTINUE TO THE BACK OF THE APPLICATION**

**SHELTER USE ONLY**

OWNERSHIP VERIFIED? YES NO DATE: LL Contacted? YES NO DATE PET DEPOSIT? YES NO DATE

MEET AND GREET REQUIRED? YES NO DATE

 STAFF/VOLUNTEER NOTES:

**Animal Information**

Is this your first experience owning/caring for an animal? ⇭Yes ⇭ No

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

⇱Companion ⇯Companion for other pet  Family pet ⇮Watchdog ⇮Barn cat/mouser ⇮Breeding ⇰Hunting ⇯Guard dog for business ⇰Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please list* ***ALL*** *current pets residing or that visit often at your home:*

Type Breed Name \*Spayed/Neutered \*\*Current on Vaccines Licensed

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***\*We may need proof from your veterinarian.***

**\*\**We ask because of the risk associated with bringing a new animal into your home if your pets are not vaccinated against common communicable diseases. Illness and even death can result for your current pets in some situations. Please ask a staff member to explain.***

***A current rabies vaccine is a State Law.***

Have you ever relinquished, surrendered, given away, or sold any pets/animals before? ⇬Yes ⇭No

If yes, please explain the circumstances involved, i.e. to whom, why and when: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Veterinarian Name/Practice and Phone Number: *(If you do not have a current vet we recommend one of our wellness centers)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we phone your veterinarian for a reference? ⇬ Yes ⇭No If no please explain:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can your veterinarian verify vaccination/medical history? ⇮Yes ⇮No If no, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What training methods will you be using? \_\_\_\_Crate Training \_\_\_\_Professional Training \_\_\_Other

How do you plan to contain your pet inside/out? \_\_\_\_\_Leash/Tie Out \_\_\_\_\_Fenced Yard

\_\_\_\_Invisible Fence \_\_\_\_Confined to specific area \_\_\_\_Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**By signing below, you are confirming the information on this application is accurate and true. Failure to disclose information, providing false or inaccurate information will slow down and possibly halt an adoption. We want the best possible match for our animals. Animals require basic needs and some require special needs and circumstances and we take that VERY seriously.**

* **We reserve the right to deny an application for ANY or NO reason.**
* **Completing an application does NOT guarantee adoption.**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_