

Justice for Dogs

Dog Adoption Application

Dog you are applying for: _____

Applicant Information

Last Name:	First Name:	DOB:
Address:		APT #:
City:	State:	Zip Code:
Home Phone:	Cell Phone:	
Email Address:		
How were you referred to Justice for Dogs?		

Family / Household Information

Do you own?	Rent?
How long have you lived at this address?	
Any plans to move in the near future?	
Landlord's/Condo board's name:	
Number of adults in the household:	
Number of children in the household:	Ages of children:
Have the children had pets before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have the adults in the house agreed to the adoption? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is anyone in the household allergic to dogs? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Why would you like to adopt a dog from us? (Check all that apply)

- Companion for self
- Gift
- Companion for child
- Watch dog
- Companion for another pet
- Companion for another household member

Employment Information

Employer	Position Held	
Address		
City	State	Zip Code
How long have you been with this employer?		Work Phone

Current Pet Information

Have you had dogs in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what were they?
Do you currently have any animals? <input type="checkbox"/> -Yes <input type="checkbox"/> -No If yes, please list below.

Name	Breed	Age	Gender	Spayed/Neutered

Veterinarian Information

Veterinarian's Name:	Veterinarian's Phone:
When was your current dogs last visit to a veterinarian and why?	

New Dog Information

What will you feed your new dog?
How often will you feed your new dog?
How much time do you think it will take for your dog to adjust to your home?
Are you able to afford a bill up to \$800 (or more) for emergency care? <input type="checkbox"/> Yes <input type="checkbox"/> No
How much do you expect to spend on dog maintenance in one year?
Are you committed to providing a loving home for the dog's entire life? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you have to move, what will you do with your dog?
Who in the household will be the dogs primary care giver?
In case of emergency, who will care for your dog?
Where will the dog be kept:
During the day? <input type="checkbox"/> During the night? <input type="checkbox"/>
How many times per day do you plan to take your dog outside?
How many times per week do you plan to take your dog for a walk?
How do you plan to house train your dog?
Do you have a fenced in yard? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, how big?
How many hours per day will your dog be left alone?
What would you do if your dog develops problems with:
Digging:
Excessive Barking:
Destructive Chewing:
Separation Anxiety:
Aggression:

In your eyes, what is the ideal home for your new dog?
How will you introduce your new dog to your home?

References

Please list 3 personal references below (not related):

1	<hr/>		
Name	How long have you known this person	Phone Number	
2	<hr/>		
Name	How long have you known this person	Phone Number	
3	<hr/>		
Name	How long have you known this person	Phone Number	

We have the right to refuse any applications.

Initials

Please fill out and mail to:

Justice for Dogs

Amy Touchette

PO Box 1014

Wolcott, VT. 05680

justicefordogsvt.org

www.justicefordogsvt.org