



Adoption Application

Today's Date: _____

We understand that this application can seem long, but please be assured that all the below information is completely necessary to completing the adoption process.

Name: _____ Email: _____

Who You're Looking For

Name of dog you're interested in: _____

If you're not sure, what age of dog would you like to adopt? _____

Male or Female (Please Circle) Size: SMALL MEDIUM LARGE (Please Circle)

What are you looking for in a dog? _____

What do you most like about dogs? _____

What do you like least about having a dog? _____

Who are you adopting the dog for? Who will be the primary caregiver of the dog?

How soon were you looking to adopt? _____ Are you interested in fostering? **YES/NO**

Address _____ City _____ State _____ Zip _____

Home Phone: _____ Cell Phone: _____

Occupation & Employer: _____

Are you over 21 years old? Yes/No

About Your Home

Type of Residence: HOUSE/APARTMENT/CONDO/DUPLEX/OTHER _____

How long have you lived there? _____ Rent or Own?

Please list your last previous address and length of time living there.



Please list all those living in residence (name, relationship, age)

NAME	RELATIONSHIP	AGE

Please list any companion animals currently living in this household.

Pet 1 - Name _____ Cat Dog
 Breed _____ Sex: Male Female
 Age: _____ Spayed/ Neutered: YES No

Pet 2 - Name _____ Cat Dog
 Breed _____ Sex: Male Female
 Age: _____ Spayed/ Neutered: YES No

Additional Pet information may be listed on back of application.

Do you have a swimming pool? YES/NO

If you have a swimming pool is it baby proof? YES/NO

Do you have a backyard or terrace? _____ If yes is it enclosed? YES/NO

If you have no yard, how will your dog relieve/exercise himself? _____

Have you ever had a dog previously? (Please provide a brief history. If deceased, state name and date of death) _____

Have you ever taken a pet to a shelter? Please explain. _____

What is your household activity level? _____

How many hours are you gone a day? _____

Who will care for your pet when you travel? _____



Do all adults work full time? **YES/NO**

How many hours a day will your new dog be alone? _____

Where will your new dog be kept when he is alone? _____

Where will your new dog be kept during the day? _____

Where will your new dog be kept during the night? _____

What sort of training do you plan on providing? _____

Who will walk your new dog? And how often? _____

Is a home visit OK? **YES/NO**

If you rent are you allowed pets? **YES/NO** Does your rental agreement specify a size restriction? **YES/NO**

Landlord's Name & Phone Number: _____

Do you have a local veterinarian? **YES/NO**

Vet's Name & Phone Number: _____

Vet records are under the name of: _____

How did you find out about PAWS4Thought? _____

DONATION – PAWS4Thought requests a donation ranging between \$250-\$350. Is this acceptable to you? **YES/NO**

Signature _____

Questions? Please contact us at PAWS4thoughtrescue@gmail.com or by phone

Negar Mirgoli 619-200-8363

Judy Clayton 323-363-4129