# Humane Society of Durham Region Dog Adoption Application

Date: Name of Dog You are Hoping to Adopt:	
PERSONAL INFORMATION (please note we require proof of address to copy and attach)	
Name:	
Address:	
City:	ļ
Postal Code:	
Home Phone:	
Alternate Phone:	
Email Address:	
Date of Birth:	

## **ADOPTION QUESTIONS:**

How long have you been thinking about adopting a dog?\_\_\_\_\_

Why are you interested in adopting this dog?\_\_\_\_\_

I would like my new dog to (please check all that apply)...

\_\_\_\_\_Be friendly with children \_\_\_\_\_Be friendly with other dogs

- \_\_\_\_\_Be friendly with cats
- Be friendly with visitors to the house
- Enjoy being groomed
- \_\_\_\_Enjoy being held
- \_\_\_\_Enjoy being patted/rubbed
- \_\_\_\_Be calm
- \_\_\_\_Be active
- \_\_\_\_Be playful
- \_\_\_\_Be quiet
- \_\_\_\_Be independent

How would you rate your level of dog experience (choose response that most closely matches your experience level):

- 1- I have never been responsible for a dog before and have limited knowledge of dogs.
- 2- I have never been responsible for a dog but have participated in caring for a dog and am familiar with basic information about dogs.
- 3- I have owned a dog in the past and been responsible for his/her care, but do not have extensive knowledge.
- 4- I have owned a dog in the past, been responsible for his/her care, and have quite a bit of knowledge regarding dogs.
- 5- I have participated in formal dog behaviour training, agility or other specialized activities with my dog and am very comfortable with all aspects of dog care.

Which of the following issues would you be **UNWILLING** to try and correct in a dog (please check all that apply):

\_\_\_\_\_Separation Anxiety

\_\_\_\_Excitability

\_\_\_\_\_Aggression

\_\_\_\_Lack of obedience

\_\_\_\_House training

\_\_\_\_Fearfulness

<u>\_\_\_\_Excessive Barking/Vocalization</u>

\_\_\_\_I am not willing to work on any behaviour issues

\_\_\_\_\_I need more information on what might be required

Are you willing to seek guidance/attend and pay for classes with your adopted dog should you experience behavioural challenges with the dog?\_\_\_\_\_

Under what conditions might you consider giving up your dog (please check all that apply):

Moving Too costly New baby Changes in the family (marriage, death, separation etc.) Aggression Illness (your own or that of a human family member) Illness (the dog) Not enough time Behavioural Issues Allergies

How often do you believe a dog should see a veterinarian?\_\_\_\_\_

How much money do you feel is reasonable to spend on a dog for one year of care (including food, toys, veterinary visits etc.)?

Less than \$250 Up to \$500 \$500- \$1000 \$1000- \$2000 More than \$2000 if required

Have you ever surrendered an animal to a humane society, animal shelter, or rescue group?

Yes No

If yes, please explain the circumstances:

Where will your dog spend most of his/her time?\_\_\_\_\_

Where will your dog sleep?\_\_\_\_\_

### YOUR HOME AND FAMILY:

Do you live in a (please check most appropriate response):

\_\_\_\_\_Detached House \_\_\_\_\_Semi detached/Townhouse \_\_\_\_\_Apartment \_\_\_\_\_Condo \_\_\_\_\_Farm/Rural

Do you consent to having a representative from the Humane Society of Durham Region visit your home to complete a suitability assessment if it is deemed necessary?

Yes No

Do you own or rent your accommodation?\_\_\_\_\_

If you are renting, please provide your landlord's name and contact information so we can confirm that he/she is aware that you intend to bring a dog home:\_\_\_\_\_

What is your employment status?	Full time	Part time	Retired
Other (please explain):			

Have you researched and considered the cost and responsibility of owning a dog?

Yes	No	
How many a	dults live in your home?	
How many c	hildren live in your home?	
lf children liv	e in the home, please provide their ages:	
Are there chi	ildren who visit your home?	
lf so, please	provide their ages and indicate how often they visit:	
Are all memb	bers of your household in agreement regarding the ador	otion of a dog?
Yes	No	
Have all mer	mbers of your household met and interacted with the do	g you wish to adopt?
Yes	No	
As far as you	u know, are any members of your family allergic to pets?	? Yes No
Please indica	ate which descriptions best describe your family and ho	usehold:
	what Active d Activity	
Noisy/s Rarely	antly noisy/social social at times noisy/social uiet/peaceful	
Do you curre	ently own other pets? Yes No	
lf yes, please	e indicate what type of animals and ages:	
Please note tl adoption proc	hat if you already have a dog, we require a dog-to-dog introd cess.	uction as part of the

Are all your current pets vaccinated? (please note we require proof of vaccination status)

Yes No

Have all your current pets been spay/neuter)	n spayed/neut	ered? (please note we requi	re proof of
Yes No			
If not, please explain:			
How many hours (on average)	will your dog	be home alone each day?	
What are some of the activities for play and exercise?			
What arrangements will you ma a prolonged period of time (bus	iness trip, va	cation etc.)?	
Do you have a yard?	Yes	No	
Does your yard have a fence?	Yes	No	
If yes, please indicate height of	fence and ty	pe of fencing material:	
Do you have a pool?	Yes	No	
If yes, is there a fence surround	ding the pool?	Yes No	
What family activities are you h hiking, cottage, agility etc)?		og can participate in (sports,	
Who will be the primary caregiv	ver for your do	og?	
Please tell us about any previo		ave owned and what happer	
Have you or any member of yo cruelty to animals?	ur household,	, ever been investigated and,	or convicted for
Yes No			

Please provide any additional information that you feel is important for us to know:

# **REFERENCES**:

Please provide full names and phone numbers.

Veterinary Reference:\_\_\_\_\_

My signature here indicates my consent for my veterinarian to release information regarding my file and pets:\_\_\_\_\_

Non-Veterinary Reference:

Non-Veterinary Reference:

#### SIGNATURE:

I understand that it is my responsibility to see and evaluate the dog for myself before agreeing to an adoption. I understand that this dog will reside in my home as a companion and that I will be responsible for providing him/her with adequate food, water, shelter, training, medical care, and affection. All of the information I have provided above is true and complete. I am in full agreement with the Humane Society of Durham Region's terms of adoption and understand that the Humane Society of Durham Region has the right to refuse an adoption application. I also release the Humane Society of Durham Region from liability and responsibility for any damage, accident or injury resulting from the placement of a dog in my household.

I understand that any falsification of information on this application is automatic cause for the application to be declined.

Signature:

Date:\_\_\_\_\_

OFFICE USE ONLY:
Staff Member Name:
Veterinary Reference Comments:
Additional Reference Comments:
Applicant Name Cleared in Pet Point system: Yes No
Photo ID Copied and Attached: Yes No
Interview Completed with Applicant: Yes No
Home Visit Required:YesNoIf yes, please make sure completed home visit form is attached.
Dog-to-dog Introduction required: YesNoIf yes, please make sure completed dog-to-dog introduction form is attached.
Adoption Application Approved or Declined:
If declined, please explain:
Does this animal have pending veterinary issues prior to being adopted?
Staff Signature:
Date:
APPROVED APPLICATION
Signature of Primary Staff Person: Date:
Secondary Approval Signature: Date:
Date that Dog is scheduled to be picked up by Adopter: