ADOPTION/FOSTER APPLICATION

Please fill out application completely. It is important to answer every question. An incomplete application will <u>NOT</u> be considered.

I Am Interested in ADOPTION: ___ FOSTER HOME: ___ Name of Animal: _____

Applicant's Full Name: _____ Co-Applicant's Full Name: _____

Relationship to Applicant (spouse, parent, roommate, significant other): _____

Address : _____Home phone: _____Cell: _____

City, State & Zip Code: _____

E-Mail Address: _____

Name of Applicant's Employer: _____Phone: _____Position_____

Name of Co-Applicant's Employer: _____ Phone: _____Position:_____

Any Other Adult Residents in Your Home; List Age & Relation: _____

Any Other Children in Your Home; List Age & Relation:_____

1. Type of dwelling: House: _____Condo: _____Apartment: _____Other: _____

2. Do you rent or own your home? Own: _____ Rent: _____

 If you rent, do you have your landlord's permission to have a dog/cat?   Yes: _____No: _____

3. Landlord's name & number: _____

4. What are your primary reasons for wanting to adopt/foster an animal?
_____

5. Does anyone in your home have allergies? Yes: ___No: ___ if yes, describe:
_____

6. Do you have a pet now? Yes: ___No: ___ If yes, how many? _____

Please list all pet(s) you & co-applicant own, currently & in the past 5 years:

Type:	Breed:	Sex:	Age:	Spayed/Neutered	Where is it now:

7. Are the pet(s) vaccinations current? If not, why: _____

8. Are your current pet(s): Indoor: _____**Outdoor:** _____

9. Where do they sleep? _____

10. Are any rooms off limits? Yes: ____No: ____ if yes, which room(s)? _____

_____

11. Does your current pet have any temperament/aggression issues? Yes: _____No: _____
   If yes, describe: _____

12. Have your pets been tested yearly for heartworms? Yes: _____No: _____

13. Are your pets on a monthly heartworm preventative? Yes: _____No: _____
   If yes, which brand: _____

14. Have you ever allowed a pet to breed? Yes: _____No: _____

15. Is Anyone at home during the day? Yes: ___No:___ if yes, who? _____
   If no, about how many hours a day will the animal be left alone? _____

16. Where will the animal stay when he/she is home alone? Be as specific as possible:
   (i.e., run of house, a specific room, a crate, etc.) _____

17. When will the animal be indoors? _____

18. When will the animal be outdoors? _____

19. Where will the animal sleep at night? _____

20. Who will care for the animal if you go on vacation? _____

21. If you move, what will you do with the animal? _____

22. What is your hurricane evacuation plan? _____

23. Do you have a fenced yard? Yes: _____ **No:** _____ **if no, how do you intend to exercise the dog?** _____

24. Do you have a doggie/kitty door? Yes: _____ **No:** _____

25. Preferred level of exercise: Couch potato _____ **short walks** _____ **vigorous walks** _____
   Hike or jog regularly _____

**26. Please list your current veterinarian. If you do not have one, list a veterinarian
   you've used in the past 2 years: Veterinarian's
Name:** _____
Phone #: _____ **Address:** _____

27. How would you discipline the animal if he/she misbehaved?
_____
_____

28. How would you train this animal? Obedience class: _____ **Hit w/newspaper:** _____
   Firm verbal command: ____ **clicker/hand signals:** ____ **other:** ____ **if other, explain:** _____
_____

**29. Please list pet(s) you have owned as an adult & the length of ownership: if they are no longer with you,
please explain:**
_____
_____

30. Please check all that apply to your home:
___ **Busy household (visits by friends, children, parties…)**
___ **Noisy (TV, stereo, machinery, tools, children playing…)**
___ **Moderate (normal comings & goings…)**
___ **Quiet (homebodies, few guests, stay home a lot…)**
___ **Lots of children in the neighborhood**
___ **Live on busy street or highway**
___ **Live on the open water or a canal**

31. Would you consider an older animal? Yes: _____ **No:** _____

32. Would you consider an animal with health problems? Yes: _____ **No:** _____

33. Animal preference: Male: _____Female: _____

Energy Level: High: _____Medium: _____Couch Potato:_____
Age: Under 1 yr: _____1-3 yrs: _____3-5 yrs: _____over 5 yrs: _____any: _____

Cost of ownership: Actual costs may vary depending on your personal veterinary costs.
This shall provide a range for a healthy animal:
* Monthly food: $15.00-$80.00
* Monthly heartworm preventative: $10.00 to $.40.00
* Monthly Flea/Tick treatment: $10.00 to $40.00
* Annual vaccines, heartworm test & fecal exams: $100.00 to $400.00

34. Do you understand that there are costs associated with the ownership of an animal?
Yes: _____No_____

35. Did you understand that this is a lifetime commitment & a pet can live up to 20 years of age?   Yes: ___No: ___

36. Are you willing to keep the animal for its entire life knowing the above?
Yes: _____ No: _____

37. Food & Veterinary costs in the case of illness or accident can be very costly, are you prepared to pay these costs in the event your pet requires extra care?
Yes: _____No: _____

38. Some animals require grooming, are you prepared to provide this grooming if at an additional cost?
Yes: _____No: _____

39. References:(only one may be a family member)

Name:	Phone:	Known how long:	
1:			
2:			
3:			

40. _____ I understand that a home visit may be required prior to placement
_____ I understand that a home visit does not guarantee placement
_____ MarrVelous Pet Rescues reserves the right to refuse an animal to any applicant for any reason. I understand this questionnaire becomes part of the adoption contract.

Signed: _____

Date:_____

Printed Name:_____

THANK YOU! We will get back to you as soon as possible.

DO NOT WRITE BELOW THIS LINE

References:

1: _____

2: _____

3: _____

Board Member Signatures:

1: _____

2: _____

3: _____