

**CANINE ADOPTION APPLICATION**

**Applicant Information:**

Adoption Applicants Name \_\_\_\_\_

List all family members living in the house and their ages \_\_\_\_\_

Address \_\_\_\_\_

Telephone number \_\_\_\_\_

Email Address \_\_\_\_\_

Animal interested in adopting \_\_\_\_\_

SIGNATURE \_\_\_\_\_

CHVS Representative signature \_\_\_\_\_

Date \_\_\_\_\_

**PLEASE NOTE: CAVAN HILLS VETERINARY SERVICES ADOPTIONS RESERVES THE RIGHT TO REFUSE ADOPTION TO ANYONE.**

**PLEASE ANSWER THE FOLLOWING QUESTIONS.**

Which dog/puppy are you interested in adopting? \_\_\_\_\_

How long have you been looking for a new dog/puppy? \_\_\_\_\_

Why do you want a new pet? \_\_\_\_\_

\_\_\_\_\_

What made you choose him or her? \_\_\_\_\_

\_\_\_\_\_

Have you ever adopted an animal from CHVS or any other rescue organization? \_\_\_\_\_

Have you ever been declined by CHVS or another rescue organization? If yes, please explain why.

\_\_\_\_\_

\_\_\_\_\_

Please list all pets you currently own or have owned within the last 10 years. Include name, age, type of pet, how long you owned the pet and where the pet is now. \_\_\_\_\_

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Do you own or rent? If you rent please list the landlords name and phone number.

Do you live in a house, duplex, apartment, condo trailer or with your parents? \_\_\_\_\_

Is anyone in your household allergic to dogs? \_\_\_\_\_

Are all members in the household involved in the adoption process and give consent to adopt a dog or puppy? \_\_\_\_\_

Do you have a fenced yard? If so how tall is the fence and what kind is it? \_\_\_\_\_

Is someone home during the day? \_\_\_\_\_

If applicable, how do you plan to house break the puppy? \_\_\_\_\_

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How many hours per day will the dog be left alone without human companionship or a potty break?

When you are away from home where do you plan to keep the dog? (crate, kitchen, laundry room, backyard...) \_\_\_\_\_

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Where will the dog sleep at night? \_\_\_\_\_

Are you willing to take your dog to obedience classes if needed? \_\_\_\_\_

Are your current pets spayed or neutered and up to date on vaccines and heartworm and flea prevention?  
What is the brand name of the heartworm prevention you give your current dogs? \_\_\_\_\_

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How many adults live in the house? Please list their ages and occupations. \_\_\_\_\_

\_\_\_\_\_

How many children live in the house? Please list their ages. \_\_\_\_\_

\_\_\_\_\_

Is your current dog mostly indoor, equally indoor and outdoor or mostly outdoor? \_\_\_\_\_

Would the dog you are interested in adopting be mostly indoor, equally indoor outdoor or mostly outdoor? \_\_\_\_\_

Approximately what percentage of the time per day will the dog or puppy be inside the house? Outside the house? \_\_\_\_\_

Have you ever given a pet away? If yes, why? \_\_\_\_\_

\_\_\_\_\_

Please list vet references and phone numbers for any pets listed above. \_\_\_\_\_

\_\_\_\_\_

**BY SIGNING BELOW, I CERTIFY THAT THE INFORMATION I HAVE GIVEN IS TRUE. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS ON THIS APPLICATION.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**CHVS Representative** \_\_\_\_\_