



ADOPTION APPLICATION

Which pet(s) are you interested in adopting? _____

What interested you about this particular pet? _____

A. PERSONAL INFORMATION

Name: _____ Age: _____

Address: _____

City, State, ZIP: _____

Home phone: _____ Cell phone: _____

Work phone: _____ Email: _____

Married Single Living with Significant Other Living with friend

Place of employment: _____

Job title: _____

Work days and hours: _____

How long employed there? _____

CO-APPLICANT – SPOUSE / SIGNIFICANT OTHER

Name: _____ Age: _____

Phone: _____ Email: _____

Place of employment: _____

Job title: _____

Work days and hours: _____

How long employed there? _____

B. HOME, FAMILY AND PETS

Do you own a home rent a home live in an apartment other: _____

If you rent, are there any pet restrictions where you live? Yes No

Yard? Yes No Size of Yard: _____ Is it completely fenced in? Yes No

Type of fence: Privacy Fence Chain Link Other Height: _____

Please list all other humans (of any age) living in the house (names and ages):

Please list all animals (dogs, cats, etc.) you own or have owned in the last 10 years:

Name	Gender	Age	Type/Breed	Altered	How long have you had this pet?	You still have it?	If no, why not?

Are all of your current pets altered (spayed or neutered)? Yes No
If not, are you willing to have the animal(s) altered prior to adoption? Yes No
If you have cats, are any of them declawed? Yes No
If you have dogs, are they all on Heartworm prevention? Yes, _____ (what kind) No
Are your pets up to date on vaccinations, including Rabies and Bordetella? Yes No
Your current pet(s) live: Indoors Outdoors Both
Your new pet(s) will live: Indoors Outdoors Both
Where will your new/current pets stay when you are at work? _____
Where will your new/current pets stay at night? _____
How often do you travel? _____
Where will your new/current pets stay when you travel? _____

C. VETERINARY INFORMATION

Current Veterinarian
Vet's name (and business): _____
Phone: _____ City, State: _____
Number of years with this vet: _____
Previous Veterinarian(s)
Vet's name (and business): _____
Phone: _____ City, State: _____
Number of years with this vet: _____

D. OTHER INFORMATION

How did you hear about Peace Love and Animals? _____
Have you ever applied to another animal rescue/shelter, if yes please specify? _____
Why do you want a pet? _____

What are your hobbies? _____
Are you prepared to deal with possible pet-related issues and expenses (barking, chewing, scratching, jumping, potty training, separation anxiety, flea infestation, vet bills etc.)? Yes No
If you were to have to relocate, would you take your pet(s) with you? Yes No
Are you prepared to keep and care for the pet for its entire lifetime (10, 15, or 20 years)? Yes No

I certify that the information provided in this application to Peace, Love & Animals is honest and accurate.

Signature

Date