PLEASE FILL OUT ALL INFORMATION COMPLETELY AND PRINT LEGIBLY. IF YOUR ADOPTION IS APPROVED THIS WILL BECOME PART OF YOUR ADOPTION CONTRACT WITH THE HUMANE SOCIETY OF DELAWARE COUNTY (HSDC). **HSDC HAS THE RIGHT TO DECLINE OR POSTPONE ANY ADOPTION BASED UPON THIS APPLICATION.** **HSDC MAY ALSO REPOSSESS ANY ANIMAL IF FALSE INFORMATION HAS BEEN GIVEN.** IF ANY ANIMAL IS RETURNED FOR REASONS THAT CONTRADICT THIS APPLICATION, NO REFUND WILL BE ISSUED. WE HAVE THE RIGHT TO VIEW YOUR PROPERTY DETAILS TO MAKE SURE THAT THIS APPLICATION IS ACCURATE. PLEASE BE ABSOLUTELY SURE THAT YOU ARE READY FOR THE LIFE LONG COMMITMENT OF OWNING A PET BEFORE YOU TAKE ONE HOME.

**Initial as read: \_\_\_\_\_**

**Adoption Application**

**Pet’s Name/ID number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Circle One: CANINE / FELINE**

**Applicants Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **City/State/Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Place of Employment & Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student?: Y / N**

**Do you Rent or Own?\_\_\_\_\_\_\_\_\_\_ Landlord’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ph:\_\_\_\_\_\_\_\_\_\_\_\_**

**Are pets allowed? \_\_\_\_\_\_\_\_\_\_\_\_\_ Pet restrictions (if any)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**# of Adults at Home: \_\_\_\_\_\_ # of Children at Home and Ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**REFERENCES (only one reference may be a relative):**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship:\_\_\_\_\_\_\_\_\_\_\_\_**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Microchip backup person: Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Their Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**This should be an alternate contact for you, if you cannot be reached. (EX: Spouse, mother/father, child etc.)**

**Please list all animals living in your home currently. Note: we require each pet is spayed/neutered and vaccinated per Ohio law:**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**How long have you owned the pet(s) listed above?: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are all of your pets current on their vaccinations? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Spayed/Neutered? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If no, why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Your Current Veterinarian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Why do you want to adopt this pet? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have you ever surrendered a pet to a pound/humane society/rescue/other? (circle one) Yes No**

**If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you have experience with this breed? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Is this pet going to be an indoor pet, outdoor pet, or both? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Where will your pet stay during the day? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ At Night? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**How many hours per day will the pet be alone? \_\_\_\_\_\_\_\_\_ Do you own a crate? \_\_\_\_\_\_\_\_\_\_\_**

**Do you have a fenced backyard? \_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **On a typical day how much exercise will the pet get? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **What type of exercise? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If you are adopting a dog, what method of training do you plan on using? Circle all that apply**

**Positive reinforcement - Home training - Professional trainer - Clicker training - Shock collar - Physical punishment - Other (please explain): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have you considered damage a puppy/kitten can do? Biting, Scratching, etc. \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have you ever had a cat declawed? \_\_\_\_\_\_\_\_\_\_**

**If adopting a cat/kitten, do you plan on having him/her declawed? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What pets have you owned in the past five years, other than current pets?**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:\_\_\_\_\_\_\_\_\_\_\_\_ Breed:\_\_\_\_\_\_\_\_\_\_\_\_**

**When and why did the relationship end with these pets?: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Why do you want a pet? (circle all that apply): Companion/Gift/Watch Dog/Mouser/child’s Pet/Friend for current pet**

**Can you afford an average of $500 in vet expenses per year for this pet? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**In case of accident/illness/death do you have someone that will assume responsibility of this pet? Yes/No**

**If yes, please provide their name/phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have you applied here before?: \_\_\_\_\_\_\_\_\_\_ Have you adopted from here before?: \_\_\_\_\_\_\_\_\_\_**

 **Please tell us how you found out about The Humane Society of Delaware County:**

 **Friend\_\_\_\_\_ Website\_\_\_\_\_\_ Facebook\_\_\_\_\_\_ TV/Radio\_\_\_\_\_ Adoption event \_\_\_\_\_ Other: \_\_\_\_\_\_\_\_**

**Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Application Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

***ADOPTION INTERVIEW (For Employee Use Only)***

**Meet & greet done, caretaker initials:\_*\_\_\_\_\_\_\_\_\_\_\_* D\*N\*A list checked:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Vet records verified:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Landlord verification:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**References checked: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Manager’s Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_**

**Notes:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**