



# Pet Welfare



## PET WELFARE ADOPTION/FOSTER APPLICATION

This questionnaire must be completed by anyone interested in adopting or fostering a pet from this facility. The following information is requested so that our adoption counselors can assist you in the selection of a new pet. **The animal's welfare is our foremost consideration.** This consultation process is designed to help us determine if the adoption/fostering is in the animal's best interest and to assist you in finding an animal most compatible with your lifestyle.

- Applicants must be 18 years of age or older.
- We reserve the right to refuse adoption/placement to anyone. Approval and refusal decision are made solely at the discretion of Pet Welfare (PW).
- Falsifying information on the application will result in disqualification from adoption/fostering.
- By submitting and signing this application, you give permission for PW to investigate and confirm the information that you provide and agree to a home visit prior to approval and/or after adoption/placement if required. You agree that this information can be shared with other shelters and rescue groups. You give PW permission to contact your veterinarian for medical information on any/all animals that you have cared for.

Date \_\_\_\_\_

Desired Pet's Name \_\_\_\_\_

Circle one: Dog / Puppy / Cat / Kitten

Circle one: Adopt / Foster

Name \_\_\_\_\_

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

Complete Current Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

*Please answer the following questions honestly. It will help us help you select the right pet for your family.*

### SECTION I IS TO BE COMPLETED BY ALL ADOPTERS/FOSTERS

1. Why do you want this pet? Check all that apply below:

- Companion     Hunting     Companion for other pet     Child's pet     Gift  
 Guard/protection     Family pet     Barker     Breeding

Other (please explain) \_\_\_\_\_

2. Do you have any preferences as to breed, sex, size, coat length, etc.? \_\_\_\_\_

3. What qualities are you looking for in the animal that you would like to adopt/foster? Be specific (examples: active, playful vs. mellow, housebroken) so that we can make the best match possible. \_\_\_\_\_

4. How many live in your household? \_\_\_\_\_ # of children \_\_\_\_\_ ages \_\_\_\_\_

5. Does any household member(s) have allergies to animals? yes / no      Has formal allergy testing been done? yes / no  
If yes, how do you plan to resolve bringing a pet into the house? \_\_\_\_\_

6. Who will be responsible for the care of this pet? \_\_\_\_\_

7. Does anyone in your household have concerns about adopting this pet? yes / no  
If so, who, and what are the concerns? \_\_\_\_\_

8. Have you or anyone in your household ever been convicted of an animal related felony or misdemeanor?      yes / no

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

9. Place of employment \_\_\_\_\_ Weekly schedule \_\_\_\_\_

Spouse's Place of employment \_\_\_\_\_ Weekly schedule \_\_\_\_\_

Do you or your spouse travel frequently? yes / no

10. Is residence a (circle one): house / condo / apartment / duplex / mobile home / townhouse?

How long at this address? \_\_\_\_\_ Rent, Own, or Base Housing? \_\_\_\_\_ Are you planning to move soon? yes / no

If yes, where/when? \_\_\_\_\_ If yes, will you be relocating your pets? yes / no

**If you rent:**

Does lease allow pets? yes / no How many? \_\_\_\_\_ Is there a weight/size restriction? \_\_\_\_\_

Is a pet deposit required? yes / no If yes, how much? \$ \_\_\_\_\_ per pet / per household

Can proof of deposit be obtained from your landlord? yes / no When does your lease expire? \_\_\_\_\_

Landlord or Property Mgr's name \_\_\_\_\_ Daytime phone \_\_\_\_\_

11. Have you applied at Pet Welfare or another shelter before? yes / no Name of shelter: \_\_\_\_\_

If you were approved, where is the pet now? \_\_\_\_\_

If you were disapproved, why? \_\_\_\_\_

12. Have you used an Animal Shelter/Humane Society to (check all that apply):

\_\_\_ To give up a pet \_\_\_ To turn in stray \_\_\_ To put pet to sleep \_\_\_ None

13. Have you ever lost a pet due to (check all that apply):

\_\_\_ ran away \_\_\_ hit by a car \_\_\_ died by other animal attack \_\_\_ given away \_\_\_ None

14. Please list all the pets you have had in the past 5 years including current pets:

Name	Type	Breed	Sex	Spay/Neuter?	Age	Indoor/Outdoor/Both?	Where is it now?
_____	_____	_____	M/F	Y/N	_____	_____	_____
_____	_____	_____	M/F	Y/N	_____	_____	_____
_____	_____	_____	M/F	Y/N	_____	_____	_____
_____	_____	_____	M/F	Y/N	_____	_____	_____
_____	_____	_____	M/F	Y/N	_____	_____	_____
_____	_____	_____	M/F	Y/N	_____	_____	_____
_____	_____	_____	M/F	Y/N	_____	_____	_____

15. Has a pet died **on your premises** within the past 3 months? yes / no If yes, cause? \_\_\_\_\_

16. Are your current pets' vaccinations current? yes / no

What type of heartworm preventative do you use? \_\_\_\_\_ Flea/tick preventative? \_\_\_\_\_

Current veterinarian clinic: \_\_\_\_\_ City/State: \_\_\_\_\_ Phone: \_\_\_\_\_

17. Will the new pet be kept (circle one): mostly inside / mostly outside / totally inside / totally outside

18. How long will this pet be left home alone during the day? \_\_\_\_\_ hours X \_\_\_\_\_ days per week

19. Where will your pet stay when it is left alone at home? \_\_\_\_\_

20. Where do you expect this pet to sleep at night? \_\_\_\_\_

21. What will you do with this pet when you go on vacation? \_\_\_\_\_

22. If you experience a **major** lifestyle change (i.e. birth, death, divorce, move) what will you do with this pet? \_\_\_\_\_

23. Have you considered the costs involved in having a pet (food, vet care, housing, etc.) and the life span of the animal? yes / no

24. Okaloosa County requires all pets to be vaccinated and to be licensed ANNUALLY and when off premises, dogs must be leashed. Cats are not allowed to leave YOUR property. Do you agree to abide by these requirements? yes / no

25. If you live on base, base regulations require that your pet be registered with the base veterinarian and that there be no more than 2 pets unless a waiver has been approved prior to obtaining the additional pet. Do you agree to abide by these requirements? yes / no

**QUESTIONS #26 – 32 TO BE COMPLETED BY DOG ADOPTERS/FOSTERS ONLY**

26. Do you have a fenced in yard? yes / no      What kind? \_\_\_\_\_      How high? \_\_\_\_\_
27. How will you keep the dog confined (circle all that apply)? on leash / in house / fenced yard / dog run / chain / crate / runner
28. Do you realize that you will probably have to housetrain this dog? yes / no      Have you done this before?      yes / no  
If yes, how? \_\_\_\_\_
29. Are you familiar with heartworm disease? yes / no      Do you plan on protecting your dog with monthly preventative? yes / no
30. Is outdoor shelter available? yes / no      If yes, what kind? \_\_\_\_\_
31. If you have cats, have they been exposed to dogs before? yes / no
32. No dog is perfect. Please tell us what behaviors you are unwilling or unable to work through (check all that apply).
- |  |  |  |                                   |
|--|--|--|-----------------------------------|
| <input type="checkbox"/> aggression towards other dogs | <input type="checkbox"/> aggression towards cats | <input type="checkbox"/> aggression towards kids | <input type="checkbox"/> barking  |
| <input type="checkbox"/> scratching at doors           | <input type="checkbox"/> thunderstorm anxiety    | <input type="checkbox"/> separation anxiety      | <input type="checkbox"/> mouthing |
| <input type="checkbox"/> destructive chewing           | <input type="checkbox"/> jumping up              | <input type="checkbox"/> rowdy behavior          | <input type="checkbox"/> escaping |
| <input type="checkbox"/> eliminating in the house      | <input type="checkbox"/> digging                 | <input type="checkbox"/> shedding                |                                   |
| <input type="checkbox"/> other: _____                  |  |  |                                   |

**QUESTIONS #33 – 37 TO BE COMPLETED BY CAT ADOPTERS/FOSTERS ONLY**

33. Do you plan to declaw this cat? yes / no      If yes, are you familiar with alternatives to declawing?      yes / no
34. Have you litter box-trained cats before? yes / no      Where will you keep the litter box? \_\_\_\_\_
35. Is there a doggie door?      yes / no      If yes, will the cat be using it?      yes / no
36. If you have dogs, have they been exposed to cats before? yes / no
37. No cat is perfect. Please tell us what behaviors you are unwilling or unable to work through (check all that apply).
- |   |  |  |                                  |
|---|--|--|----------------------------------|
| <input type="checkbox"/> scratching furniture or carpet     | <input type="checkbox"/> jumping on counters/furniture | <input type="checkbox"/> rough play (biting) | <input type="checkbox"/> meowing |
| <input type="checkbox"/> eliminating outside the litter box | <input type="checkbox"/> shedding                      | <input type="checkbox"/> other: _____        |                                  |

**QUESTIONS #38 – 40 TO BE COMPLETED BY FOSTERS ONLY**

38. Will you be able to keep the foster animals separate from your own if necessary?      yes / no  
How? \_\_\_\_\_
39. What will you do to find your foster animal if it becomes lost? \_\_\_\_\_

40. Please read and initial the following:

I understand that anyone interested in adopting a foster animal, including myself, must go through the standard adoption process. I understand that although PW takes reasonable care to screen animals for foster care placement, it makes no guarantee relating to the animals' health, behavior, or actions. I understand that I receive foster care animals at my own risk and can reject or return any animals for which PW has asked me to provide care with reasonable advance notice to the dog or cat coordinator. I indemnify and hold PW free and harmless from all liability arising out of any and all claims, demands, losses, damages, action, judgment of every kind and description which may occur to or be suffered by me, members of my household, or any third parties by reason of activities arising out of this agreement. I also understand that if approved to provide foster care, I will be required to sign a Foster Care Contract. \_\_\_\_\_ (initials)

\*\*\*\*\*  
I have answered the screening questions truthfully to the best of my ability. I understand that any misrepresentation of this information is grounds for refusal of adoption. I have read the release statements at the top of the application and acknowledged them.

\_\_\_\_\_  
(Applicant's Signature)      \_\_\_\_\_  
(Co-applicant's Signature)

\*\*\*\*\*  
**FOR PET WELFARE USE ONLY – DO NOT WRITE BELOW THIS LINE**  
\*\*\*\*\*

Application accepted by \_\_\_\_\_ Date \_\_\_\_\_

Comments:

Adopter/Interviewer \_\_\_\_\_ Date \_\_\_\_\_

Approved       Rejected       Tentatively approved

Reason for rejection:

Other comments or conditions to this adoption:

Notes: