

Pet Interested in: _____

Today's Date: _____

This questionnaire has been designed to aid us in determining if potential adoption homes are prepared to assume the type of responsible guardianship we endeavor to assure for our rescued animals. Our goal is to be thorough; not invasive. Please answer all questions honestly and feel free to add comments. You must be 21 years old to adopt and we do not adopt to families with children under 5 years old. We also rarely adopt out of state. PLEASE print legibly and clearly. Thanks!

ABOUT YOU (Person applying must be 21 yrs of age and the primary person responsible for this animal).

Name: _____ Email: _____ Age: _____

Phone: _____ (home) _____ (cell) _____ (work)

Name of spouse/significant other/roommate: _____ Age: _____

Address: _____ City: _____ Zip: _____

Your Occupation: _____ Spouse occupation: _____

If this relationship were to change, with whom would the pet remain?: _____

Who will be primarily responsible for the dog's care? _____

Members in household? _____ Does anyone smoke? Yes No

Do you have children? Yes No Age(s): _____

Do they live with you? Yes No Have they been around dogs? Yes No

Are you planning a family (or more children) in the future? Yes No If so, when? _____

What are your reasons for adopting a dog? Companion for you For your dog Spouse

Children Gift (for whom?) _____ Other _____

In your selection of a dog, what are your preferences?

Breed Type _____ Age _____ Sex _____ Color(s) _____

Would you consider:

Special Needs Abused Dog with Behavior Issues Senior Blind/Deaf

Qualities you are looking for in a dog: _____

Will you mind having a dog follow you around? Yes No Do you smoke? Yes No

Are you familiar with the characteristics and temperament of this breed? Yes No

How so? _____

What, if any, concerns do you have about adopting? _____

Are you prepared to pay up to \$40+ every 4-6 wks to groom your pet? Yes No

HOME INFORMATION

Type of Dwelling: House Apt Condo/Townhouse Mobile Home

Do you: Own Rent How long? _____

If you do not own your home, do you have permission to have pets? Yes No

May we contact the landlord? Yes No

Landlord/Owner contact name and number: _____

Dog will be: Indoor only Outdoor only Mostly Outdoor Indoor/Outdoor Access

Pet Door?: Yes No

If indoor only, describe what outdoor access the pet will have (to go out, etc.) _____

If you answered mostly outdoor, please explain: _____

How many hours on average daily will your dog be alone?

0-2 3-5 6-8 8-10 10-12 12 +

How many hours on average daily will dog be left outside: _____

Any provisions to let the dog(s) out during the day while you're gone? Yes No

When you leave during the day, where will the dog stay? _____

What outside space is available for the dog(s)?

Enclosed yard Unfenced yard Kennel Run Garage Balcony/Patio

Other provided area(s): _____

Do you have a fence? Yes No Fence Height _____

Type of Fencing? Chain Link Block Wall Wood Other _____

Grassy Area? Yes No Pool? Yes No Locks on gates Yes No

Pool Fenced? Yes No Enclosed Patio? Yes No

Will dog(s) be tied up? Yes No Where will dog(s) sleep: _____

If in house, where? _____ If outside, where? _____

Any areas where the dog(s) will not be allowed? _____

Planning a move in the next six months? Yes No If yes, out of state? Yes No

Where: _____

If you had to move unexpectedly, what would happen with your dog(s)?

PAST/PRESENT PET HISTORY (Past 10 years only)

Have you had a dog in the past 10 years? Yes No

Do you presently have a dog(s)? Yes No

Number of dogs in household _____

Please describe:

	Still	What happened to
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Breed	Age	Sex	Altered	Where did dog come from	Age Acquired	alive?	your dog?
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Other pets in the home: _____

Please explain: _____

Current or last veterinarian (name, phone): _____

May Lhasa Happy Homes contact your veterinarian? Yes No

Do you have a friend or relative who would care for the dog(s) if you became incapable of caring for him/her for an extended period of time? Yes No

Please provide name/address/phone number: _____

Will your dog(s) be allowed on the furniture? Yes No

If no, why not? _____

Will you become frustrated or have a problem if your dog(s) is not housebroken? Yes No

Under what conditions would you NOT keep your dog(s)?

New baby Dog grew to big Allergy Not obedient Shedding Move Chewing

Not Housetrained Pets didn't get along Medical Issues Behavioral Issues Biting

Wouldn't give up for any reason Other (explain) _____

What would you do with your dog if you couldn't keep for the any above reason(s)?

Return to rescue Put to Sleep Take to a shelter Return to Lhasa Happy Homes Other (explain)

If your dog needed acute medical attention or emergency care, are you prepared to

handle the expense? Yes No

If your dog developed an illness and required monthly medication, up to what amount would you be

comfortable spending: \$0-25 \$26-50 \$51-75 \$76-100 Whatever it takes

Would you be willing to take a dog that required monthly medication up to \$50/mo? Yes No

If you currently have a dog, what brand of food are you feeding? _____

If a higher quality brand was recommended, but more expensive, would you be willing to change? Yes No

If no, why not? _____

Have you ever trained a dog in obedience class? Yes No

Would you agree to take this dog(s) to obedience school: Yes No

What is the amount you would expect to pay for obedience or behavioral training and what would

be acceptable if necessary? \$0-75 \$76-150 \$151-300 \$301-500+ Whatever it takes

Would you ever use a newspaper to object to reprimand your dogs? Yes No

How will you reprimand your dog(s)? _____

What would happen to dog(s) if your family situation changed (divorce, relocation, death)?

Please answer in detail: _____

Have you ever given away/sold/released an animal to an animal shelter or rescue organization?

Yes No **If so, what were the circumstances?** _____

Have you ever been denied adoption by a rescue group or humane organization? Yes No

If so, by whom and why? _____

Will you be able to live with fur on your furniture, stains on your rugs, swarm body on your bed, a dog that may be destructive at times? Yes No

Do you travel a lot? Yes No

Where will your dog(s) stay when you are on vacation? _____

If at home, is someone with them at night? Yes No

Please briefly describe your lifestyle: (active, social, homebodies, etc) _____

How is your general health/health issues? _____

How did you hear about this group?

Website (name) _____ Newspaper ad _____

Referred by _____ Shelter/Pet Store/Vet _____

Other _____

Adopters over the age of 70 are required to have a co-adopter in case of accident or death. If this applies to you, who would be your co-adopter? (Please include name/address/phone)

Please list three references (name, relationship and phone):

Any additional information you would like to add:

I CONSENT TO A HOME CHECK IN THE EVENT MY APPLICATION IS APPROVED Yes No

Signature: _____ Date: _____

Please keep in mind that providing false information will result in the nullification of this application.

Thank you for your time and patience in completing this application. We're honored to be able to assist you in adopting your next family member!