

HEARTLAND ANIMAL SHELTER DOG ADOPTION APPLICATION

Heartland Animal Shelter reserves the right to approve or deny applications. Applications are considered with the best interests of the animals in mind and should not be construed as a reflection on the applicant.

In order to adopt, Applicants **must**:

- 1) be 21 years of age or older and a U.S. citizen,
- 2) have the consent of all adults living in the household,
- 3) have a valid state-issued ID with current address, and
- 4) have a current lease or landlord's name and phone number for verification that pets are allowed (for renters only).

Please Note: False or omitted information will result in an application being denied.

Please Print

Today's Date _____ Dog Name _____ Adoption Counselor _____

Your Name _____ Home # _____

Work # _____ Cell # _____ Email _____

Home Address _____
City
State
Zip

Employer _____ Phone _____

Veterinarian _____ Phone _____

Reference _____ Phone _____

How did you learn about Heartland Animal Shelter? _____

About your household:

Type of Residence: *House / Apartment / Condo / Mobile Home / Military Base / Dorm / With Parents*

Do you: Own___? Rent___? Landlord's Name & Phone # _____

Number of Adults _____ Number of Children _____ Children's' Ages _____

Who will be responsible for feeding the pet? _____

Who will be responsible for training the pet? _____

Why are you seeking to adopt a dog today? *(Please circle all that apply)*

Companion for adults / Companion for children / Companion for another pet / Guard or Watch Dog / Gift / Other _____

Please list all pets you have owned in the past five years:

Pet's Name	Type/Breed	Kept Where? (i.e. indoor / outdoor)	Current Age (if applicable)	Gender	Spayed / Neutered?	Current Status (deceased, still own, etc?)
				M F	Y N	
				M F	Y N	
				M F	Y N	
				M F	Y N	
				M F	Y N	
				M F	Y N	

When was your pets' last visit to the vet? _____ Purpose? _____

Is anyone in your household allergic to dogs? _____

If you move, what will you do with your pet(s)? _____

Under what circumstances would you not keep the dog? _____

What days/times would be convenient for a follow-up home visit by Heartland? _____

Pet Care:

Approximately how much do you anticipate spending **annually** to feed, vaccinate, license, and provide medical care (routine and emergency) for your new dog? \$50_____ \$50 - \$100_____ \$100 - \$150_____ Over \$200_____

The pet will be without human companionship for approximately _____ hours per day, _____ hours per week.

Where will the dog be kept during the day? _____ During the evening? _____

If adopting a puppy, how do you plan to housebreak? _____

How do you plan on addressing behavioral problems such as:

Barking? _____

Chewing or other destructive behavior? _____

Digging? _____

Growling, snapping, guarding, or other aggressive behavior? _____

Do you plan to take your dog to training classes? Yes_____ No_____ If yes, Where? _____

What type of identification do you plan to place on your dog? _____

Dogs can take up to a month to adjust to their new homes, particularly if there are other pets.

Are you willing to devote this time? _____

By signing below, I recognize that this application is the property of Heartland Animal Shelter. I certify that the information I have given is true and correct. I understand that false information can result in the denial of this adoption. I authorize Heartland Animal Shelter to investigate the statements on the application, and further understand that Heartland has the right to deny this application for any reason.

Signature _____ Date _____

STAFF USE ONLY

ID # _____ Name of Dog _____ Age _____

Adoption Counselor's Name: _____

Comments: _____

Scheduled pick-up date (notes) _____

Date & time for spay/neuter (if applicable) _____

Staff Adoption Approval Signature _____