



Rabbit, Small Animal, or Bird Adoption Applicant Profile

ANIMAL NAME: _____
Species: _____
IMPOUND #: _____
<i>OFFICE USE ONLY</i>
<input type="checkbox"/> APPROVED P/U DATE: ____/____/____

DATE: ____/____/____; TIME: _____

YOUR NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

HOME PHONE: _____

WORK PHONE: _____

E-MAIL: _____

OCCUPATION: _____

PRESENT VET: _____



- WHO WILL LIVE WITH THIS ANIMAL? _____
- DOES THIS INCLUDE ANY CHILDREN? YES NO. IF SO, WHAT ARE THEIR AGES? _____
- WILL THIS ANIMAL BE KEPT: INSIDE, OUTSIDE, BOTH?
- WHAT KIND OF HOUSING AND EXERCISE FACILITIES WILL THIS ANIMAL HAVE? _____
- _____
- WHERE WILL THIS ANIMAL SLEEP THE *FIRST* NIGHT? _____
- UNDER WHAT CIRCUMSTANCES WOULD YOU *NOT* KEEP THIS ANIMAL? _____
- _____
- WHAT IS YOUR EXPERIENCE WITH THIS SPECIES? FIRST TIME OWNER, HAD ONE OR TWO, ENTHUSIAST.
- WHAT IS YOUR ACTIVITY LEVEL AT HOME? PEACEFUL, MEDIUM, ACTIVE

CURRENT PETS

	BREED?	SPAYED, NEUTERED?	AGE?	KEPT WHERE?	OWNED HOW LONG?	LICENSE # (DOGS ONLY)
1.						
2.						
3.						

PETS OWNED IN THE LAST 5 YEARS?

	BREED?	SPAYED, NEUTERED?	KEPT WHERE?	WHAT HAPPENED TO IT?
1.				
2.				
3.				

- **WHY DO YOU WANT AN ANIMAL? FOR** CHILDREN, YOUR COMPANIONSHIP, YOUR SPOUSE, A GIFT, COMPANIONSHIP FOR YOUR OTHER PETS.
 - **OTHER REASONS?** _____
 - **WHY DO YOU WANT THIS ANIMAL?** _____
-
- **DO YOU HAVE A SECOND CHOICE?** YES NO. IF SO, NAME: _____
 - **DO YOU LIVE IN A** HOUSE, CONDO, APT., MOBILE HOME. TIME AT CURRENT ADDRESS? _____
 - **DO YOU** OWN OR, RENT? IF YOU RENT, ARE PETS ALLOWED? YES, NO
- LANDLORD NAME:** _____ **PHONE:** _____

>>>>PLEASE READ & SIGN<<<< ADOPTION APPLICATION AND ADOPTION POLICIES	
<ul style="list-style-type: none"> • Applicants may not interact with a pet or adopt a pet for six business days after the pet's impound (or arrival) at the Shelter. (Sundays and holidays do not count.) Applications are accepted on pets during the waiting period. • Applicants must interact with pet before adoption. • When possible for the species, pets adopted from this shelter are spayed or neutered. 	<ul style="list-style-type: none"> • The adoption process is not first-come first-served. Shelter management makes the decision for each adoption. Each pet is different as is each applicant. Shelter management looks for a compatible fit between pet and applicant. • The shelter will try and contact unsuccessful applicants.
Species Specific Questions: <ul style="list-style-type: none"> • Does keeping this species require a permit? <input type="checkbox"/> Yes <input type="checkbox"/> No. Does the adopter have a permit? <input type="checkbox"/> Yes <input type="checkbox"/> No. • Are there number limits on this species in the adopter's jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No. IF yes, THEN what are the limits? _____ • Is a site inspection needed before adopting this species? <input type="checkbox"/> Yes <input type="checkbox"/> No. • Does the adopter know how to handle this species? <input type="checkbox"/> Yes <input type="checkbox"/> No. IF no, THEN provide this information. • Does the adopter know the dietary requirements for this species? <input type="checkbox"/> Yes <input type="checkbox"/> No. IF no, THEN provide this information. 	
APPLICANT'S SIGNATURE: _____ <i>To the best of my knowledge, the information provided on this form is accurate. I understand that submission of this form does not guarantee that I will be able to adopt this animal.</i>	

FOR OFFICE USE ONLY	
APPLICATION RECEIVED BY _____ INITIAL LANDLORD APPROVED <input type="checkbox"/> YES <input type="checkbox"/> NO _____ INITIAL <input type="checkbox"/> ADOPTER TO CONTINUE MEDICATION <input type="checkbox"/> STAFF HAS REVIEWED SPECIES SPECIFIC QUESTIONS WITH ADOPTER. <input type="checkbox"/> APPROVED, BY: _____, DATE/TIME: _____ <input type="checkbox"/> REFER TO MANAGEMENT	<input type="checkbox"/> APPLICATION COMPLETE <input type="checkbox"/> REVIEWED WITH ADOPTER <input type="checkbox"/> IF REQUIRED, PERMIT OR SITE INSPECTION COMPLETE. <input type="checkbox"/> ADDED IMPOUND NUMBER <input type="checkbox"/> ANIMAL AND ADOPTER HAVE INTERACTED
INTERACTION RESULTS NOTES AND RESULTS OF INTERACTION WITH ADOPTER BY VOLUNTEER/STAFF: _____ _____ _____ _____	
OTHER COMMENTS	