

Animal Protection Society - Friday Harbor 938 Cattle Point Road ~ PO Box 1355, Friday Harbor WA 98250 (360) 378-2158 Shelter Office apsfh.com

CANINE ADOPTION APPLICATION

Thank you for your interest in adopting a dog from the Animal Protection Society of Friday Harbor! Because pet ownership is a serious, long-term commitment, we wish to do everything possible to ensure that animals currently in our care are matched with their perfect forever homes.

This application form is indeed a lengthy one, but the information we're requesting will help us make the best matches possible – both for the dogs and for the potential adopters. So please be both thorough and honest in your responses.

It is important to understand that filling out this application does NOT guarantee that you will be able to adopt the dog you want. Once your application is received, it will be carefully reviewed by our staff, who will appreciate your patience as the review process proceeds. Our staff is small, and occasionally there is a high volume of applicants or a chosen pet has special needs that must be taken into consideration. If staff have questions about any of the information on your application, you will be contacted for clarification.

THINGS TO KEEP IN MIND BEFORE APPLYING:

- All applicants must be at least 18 years of age to apply to adopt from APS-FH.
- When multiple applications are received for the same dog, we will review each application and base our decision on what we determine is the best fit for the dog.
- Other pets in the potential adopter's home must all be spayed/neutered and are strongly encouraged to be up to date on vaccinations prior to bringing home a shelter animal.
- APS-FH is a private shelter, and reserves the right to deny an application for any animal for any reason.

NAME OF THE CANINE YOU WISH TO ADOPT: _____

PERSONAL INFORMATION:

Applicant Name:		Today's Date:		
House/Home Address: _				
	City	State	Zip Code	
Mailing Address:				
	City	State	Zip Code	
Home Phone:		Alternate Phone:		
E-Mail Address:		-		
If applicant is working, na	me of employer:			
HOUSEHOLD INFOR Please list names and ag	-	in your household:		
Please list two (2) perso one another:	nal references of peop	le not living with you,	or related to you or	
Name:	Phone: _	R	elationship:	
Name:	Phone: _	R	elationship:	

	ren frequently v vhat are their ag	isit your home? es?	YES / NO		
What ty	pe of residence of	do you live in?			
	_House	_Apartment	Condo	Boat	_Other(please specify)
Do you	rent or own your	residence?			
lf You R	ent: LANDLORD	INFORMATION:			
Name:				Phone Number	r:
		will be contacting			
rees/dep	oosits), and if so	, what are they?			
How ma	ny years have ye	ou lived at your cu	rrent address?		
Les	ss than 1 year	1 year +	2 years +	3 years	s +4 years +
Do you	plan on moving s	sometime during t	he next year?	YES / NO)
What wo	ould you do with	this dog should ye	ou move?		

Do you have a fenced yard? YES / NO

If <u>yes</u>, what type of fencing and how high is each side? If <u>no</u>, how will you safely contain your dog when it is outside?

Are you a first-time dog owner? YES / NO Have you ever adopted a rescue pet before? YES / NO If yes, please provide details. (pet type, where, when, etc.)

Is this your first adoption from APS-FH? YES / NO

Please list all the pets you have owned in the last five years and why you no longer have them (e.g. passed of old age, euthanized, gave away, hit by car, breed, age of pet, etc.) If you haven't owned a pet in last ten years, leave blank.

Do you currently have any other pets in your home? If yes, please fill in the following information.

Name:	Туре:			Age:	
Spayed/Neutered:	□YES □NO	Current on Vacci	nations:	□YES	□NO □Unsure
Resides: Indoor	□Outdoor □Both	Other Info:			
Name:	Туре:			Age:	
Spayed/Neutered:		nt on Vaccinations:	□YES	□NO	□Unsure
Resides: Indoor	□Outdoor □Both	Other Info:			
Name:	Туре:			Age:	
Spayed/Neutered:		nt on Vaccinations:	□YES	□NO	□Unsure
Resides: Indoor	□Outdoor □Both	Other Info:			
Name:	Туре:			Age:	
Spayed/Neutered:		nt on Vaccinations:	□YES	□NO	□Unsure
Resides: Indoor	□Outdoor □Both	Other Info:			
If you have another dog(s), are they socialized and friendly with people and other animals? YES / NO Please explain if needed:					

Who is your current veterinarian?

(APS-FH will contact your veterinarian and will need permission for information regarding your current/past animals)

Business		

Name

Phone Number

Do you have the financial resources for proper veterinary care?	YES / NO
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Are you willing and able to accept the cost of this dog's care and medical needs for the remainder of its life? (e.g. medical expenses, vaccines, food, emergencies, etc.) YES / NO

How would you describe your home environment (e.g. quiet, active, grand central station, etc.)?

Why are you looking to adopt at this time?

Where will the new dog spend the majority of its time? (e.g. indoors, outside or both) Please describe.

Where will the dog be when you are not at home? Please describe.

How many hours are you away from home each day, and how many hours maximum will the dog be left without human contact during the day?

Who will care for the dog should you need to leave? (e.g. vacation, emergency, etc.) Please describe.

If you adopt a dog that needs training, what are your plans for this?

How do you intend to exercise this dog and how often?

Is every household member 100% in favor of adopting a dog? YES / NO

Do all members of the household understand it may take a few days/weeks/months for a new dog to become adjusted to its new home and other pets? YES / NO

Can you tolerate pet accidents in your home while your new pet adjusts? YES / NO

What plan of action will you use if "accidents" continue to occur?

Do you or any of your family members have allergies to pets? YES / NO

Under what circumstances would you ever give up your dog?

What particular characteristics (if any) are you looking for in a dog? Also, what characteristics would you view as problematic in your new dog?

How would you try to resolve the problematic characteristics?

Have you ever surrendered a pet for any reason? If so, why?



I UNDERSTAND THAT COMPLETING THIS APPLICATION IS NOT A PROMISE OR GUARANTEE OF ADOPTION APPROVAL, but rather a starting point for APS-FH staff to evaluate my lifestyle relative to how a particular dog might fit in. Not being matched with one dog does not mean that I wouldn't be matched with a different dog, given that the goal of APS-FH is to find the perfect dog for my needs and the perfect home for each dog.

By signing below, I certify the information provided within this application is true and correct to the best of my knowledge. I understand that if I have knowingly omitted information or have given any false information APS-FH may automatically deny my application. My signature below gives APS-FH permission to contact my veterinarian, references, and any other persons or entity to verify any of the information I have submitted herewith.

SIGNATURE _____

DATE

*****	DO NOT WRITE IN BELOW AREA
APPROVED / DENIED	DATE STAFF SIGNATURE
PAID : YES / NO	AMOUNT \$ CASH CHECK# C.C
ANIMAL NAME	FILE NUMBER Circle : DOG PUPPY
IF PUPPY IS NOT YET SPAYEI	D, HAS SPAY/NEUTER DEPOSIT BEEN PAID? YES NO
ADOPTION DENIAL REASON:	



THIS INFORMATION IS STRICTLY CONFIDENTIAL / ANY DUPLICATION IS ILLEGAL AND PROHIBITED

Revised 11/11/2020 BA