



## ADOPTION APPLICATION FORM

PLEASE ANSWER ALL QUESTIONS. WE DO NOT PROCESS INCOMPLETE APPLICATIONS. Thank you.

### General Information

How did you hear about our dogs? \_\_\_\_\_

### Contact and Personal Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ County \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Best time to call: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Are you employed? Yes  No

Occupation: \_\_\_\_\_

Place of Employment / Name of Employer: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Do you live in: a house  an apartment

Do you own the property? Yes  No

If you live in an apartment, are you permitted to have pets?

Name and Phone Number of Landlord: \_\_\_\_\_

How long have you lived at your current address? \_\_\_\_\_

Do you have a fenced yard? \_\_\_\_\_

If so, height and type of fence: \_\_\_\_\_

If not, would you consider erecting a fence? \_\_\_\_\_

Please list the names and ages (and occupation, if applicable) of all people (including children) living with you:

<u>Name</u>	<u>Age</u>	<u>Occupation</u>	<u>Place of Employment</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Why are you interested in adopting? (Check all that apply)

- Companion for Self
- Companion for Family
- For Protection
- To Replace Previous Pet
- Gift
- For Child
- As a Companion for Another Pet
- Other. Please explain. \_\_\_\_\_

Do you or any member of your family have allergies to animals? Yes  No

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

Do you travel: Yes  No

If yes, how often and how long are you gone at a time? \_\_\_\_\_

When you are away from home for an extended period of time, where will the dog be? (Check all that apply)

- In a kennel
- With relatives/friends who own other animals
- With relatives/friends who do not own other animals
- At home with a friend or relative who will stay with and care for the animal
- At home with a dog sitter
- At home. A dog walker will stop by \_\_\_ times a day to feed and walk/let out the dog
- Other: \_\_\_\_\_

## **Dogs You Are Interested In:**

Which dog are you interested in? Please list in order of desirability.

Choice 1 - \_\_\_\_\_

Choice 2 - \_\_\_\_\_

Choice 3 - \_\_\_\_\_

Are you looking for a: Male  Female  Either

Do you prefer a: Puppy  Adult  Either

If you have a preference in color and weight, please describe it here: \_\_\_\_\_

Do you prefer a dog that is already housebroke? Yes  No

How far can you drive to meet the dog? \_\_\_\_\_

Can you bring all family members and pets to meet the dog you are considering? Yes  No

Additional requirements about the dog you would like to mention: \_\_\_\_\_

## **Community Information**

Do you know the laws in your municipality relating to dogs in general and pit bull type dogs in particular? Yes  No

If yes, please specify: \_\_\_\_\_

Would you like us to help determine the laws? Yes  No

Are you prepared to deal with the discrimination that may come with Pit Bull ownership (i.e., community bias, rental restrictions, insurance discrimination, neighbors' negative reactions, etc.)? \_\_\_\_\_

## Living Situation

Dog's living situation (check all that apply):

- Dog will be living inside with the family
  - Dog will live in the basement or garage
  - Dog will live outdoors
  - Doghouse will be provided
  - Dog will be used as a guard dog for:
    - Residence  Business
  - Other - \_\_\_\_\_
- 

How many hours a day will the dog be home alone? \_\_\_\_\_

When the dog is home alone, the dog will be (check all that apply):

- In a crate, wire cage or dog pen inside
  - In a kennel: Outdoor  Indoor  Both
  - Secured outside: Cable  Chain
  - Dog will be loose: Indoor  Outdoor
  - Other: \_\_\_\_\_
- 

At night, where will the dog sleep?

- In a crate, wire cage or dog pen inside  
If so, where? \_\_\_\_\_
  - In a kennel: Outdoor  Indoor  Both
  - Dog will be loose: Indoor  Outdoor
  - Dog will sleep in a room with the adopter or other family member
  - Other: \_\_\_\_\_
- 

How will the dog get exercise? (Check all that apply)

- Leash walks: how many per day? \_\_\_\_\_ estimate amount of time on each walk: \_\_\_\_\_
  - Will have cable or dog run in the yard
  - Will be free to run in fenced yard
  - Will have supervised access to unfenced yard
  - Will be free to roam around (off leash and unsupervised in unfenced area)
  - Will take to dog park (public area where dogs can run and play together off leash)
  - Other: \_\_\_\_\_
- 

Where will the dog not be allowed? \_\_\_\_\_

How will you block the animal from that area? \_\_\_\_\_

Will you take the dog to obedience training? Yes  No

If so, where and when? \_\_\_\_\_

Please provide the name of the vet you currently use or to whom you will take the dog? \_\_\_\_\_

### **Other Pets**

Do you currently have other dogs? (Check all that apply)

- No other dogs
- One or more spayed female(s)
- One or more neutered male(s)
- One or more unspayed female(s)
- One or more unneutered male(s)

Please specify breeds, ages, sex and place of origin of other dogs:

<u>Name</u>	<u>Sex</u>	<u>Breed</u>	<u>Age</u>	<u>Origin</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Besides dogs, what other kind of animals do you own? \_\_\_\_\_

Do you currently plan on getting any animals in the future? Yes  No

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

Please provide the name of your current vet: \_\_\_\_\_

Please provide the phone number for your vet: \_\_\_\_\_

### **Breed Information and Experience**

Of all "breeds" available, why do you want a pit bull type dog? \_\_\_\_\_

Please explain any prior experience you have had with this "breed": \_\_\_\_\_

Are you familiar with the characteristics and temperament of the American staffordshire terrier / American pit bull terrier?

Please describe. \_\_\_\_\_

Will owning a pit bull be any different than owning any other type / "breed" of dog? \_\_\_\_\_

What challenges do you feel owning a pit bull may present? If any, please describe. \_\_\_\_\_

### **Dogs' History**

Often times the complete history of a rescued dog may not be known. We will provide you with a description of our experience; however, do you realize that you may encounter some behavioral problems? Yes  No

In addition, do you realize that after adoption, the dog may not act the same in a home as the dog acts in a shelter environment? Yes  No

In the event the dog you are considering adopting has any behavioral issues, are you willing to work with a professional trainer / behaviorist on correcting any such issues? Yes  No

### **Transition**

Sometimes animals do not adjust to their new environments well. Are you prepared to spend several weeks, perhaps even months, waiting for your new pet and helping your new pet to adjust to a new environment? Yes  No

### **General**

What will you do if you cannot keep the dog (e.g., if pit bulls are banned, if something unexpected happens)? \_\_\_\_\_

Have you considered the expenses for maintaining an animal (e.g., food, vaccinations, monthly heartworm preventative, Monthly flea / tick preventative, unexpected medical expenses, obedience training)?

Yes  No

What behaviors or circumstances might cause you to give away this dog or to take it to a shelter? \_\_\_\_\_

## References

List the name, phone numbers, relationship to you and length of relationship for three (3) **unrelated** references. If you've worked With dog trainers, groomers, vets, please list here.

<u>Name</u>	<u>Phone Number</u>	<u>Length of Relationship</u>	<u>Relationship to You</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**I hereby represent and affirm that I, the undersigned and Applicant, have provided all information within my knowledge, and all of the information provided in this Application is true, correct and complete.**

**I, the undersigned and Applicant, understand that submission of this Application does not necessarily mean that I will be approved to adopt, and For the Love of Pits reserves the right to reject any applicant for any reason. I understand that For the Love of Pits cannot guarantee the availability of any of its dogs until this Application is approved and the adoption process is complete. I authorize For the Love of Pits to verify any and all information set forth in this Application.**

IF THIS APPLICATION IS SUBMITTED ELECTRONICALLY, I UNDERSTAND THAT BY TYPING MY NAME IN THE "APPLICANT'S SIGNATURE" BOX BELOW ACTS AS MY LEGAL SIGNATURE AND ACKNOWLEDGMENT THAT I READ, UNDERSTAND AND AGREE TO THE ABOVE STATEMENTS.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Without your signature we cannot process this application).

Once you have completed this application, please SAVE the document as a PDF file. Then, please send the application to:

Shana@FortheLoveofPits.org

or

For the Love of Pits

P.O. Box 19292

Cleveland, Ohio 44119