Pet Project Inc.

Dog Adoption Application

Please fill out and e-mail as an attachment to: petprojectinc@gmail.com **OR**

Print, fill out by hand, and mail it to: Pet Project Inc, 2676 E 2575th Rd, Marseilles, Il 61341

PPI is dedicated to finding the very best homes for rescues. To meet this goal, we carefully scrutinize all applications. We check all veterinarian and personal references and confirm rental arrangements with landlords. If you are serious about adopting a cat, please complete the application IN FULL. Questions left blank will only slow the adoption procedure.

Please CHECK or FILL IN the appropriate choices throughout this questionnaire.

Name _____ Date of Birth _____
Street address _____ City _____ State _____ Zip _____
Phone Number _____ Email Address _____

Do you ☐RENT or ☐OWN? ☐House ☐Townhouse ☐Condo ☐Apartment ☐Dorm ☐Trailer
If you rent, do you have landlord's permission to adopt a dog? ☐ YES ☐ NO

Landlord Name _____ Landlord Phone# _____
How long at this address _____

Occupation _____ Employer _____
Work Address _____ Length of Employment _____

Please Select: ☐ Married ☐ Partner ☐ Single ☐ Roommate ☐ Live with Parents

Partner/Spouse Name _____ Date of Birth _____
Occupation _____ Employer _____ Length _____
How many adults in the home? ____ Children? ____ Please list ages/gender of children in household:

Current Pets

Species/Breed _____ Age _____
Sex _____ Spayed/Neutered ☐ YES ☐ NO
☐ Indoor ☐ Outdoor ☐ Both
How long have you owned? _____

Species/Breed _____ Age _____
Sex _____ Spayed/Neutered ☐ YES ☐ NO
☐ Indoor ☐ Outdoor ☐ Both
How long have you owned? _____

Species/Breed _____ Age _____
Sex _____ Spayed/Neutered ☐ YES ☐ NO
☐Indoor ☐ Outdoor ☐ Both
How long have you owned? _____

Species/Breed _____ Age _____
Sex _____ Spayed/Neutered ☐ YES ☐ NO
☐ Indoor ☐ Outdoor ☐ Both
How long have you owned? _____

Please list any pets owned in the last 10 years that are no longer with you and why:

_____

_____

_____

Dog Experience Time

- ☐ First Time Owner
- ☐ Have had one or two
- ☐ Knowledgeable & Experienced

Away From Home?

- ☐ Home all day
- ☐ Out part-time
- ☐ Away 7-10 hours daily

Home Atmosphere

- ☐ Grand Central Station
- ☐ Some activity
- ☐ Quiet and Calm

What is the name/s of the dog you are applying for? _____

Are you adopting this pet for your home? ☐ YES ☐ NO Is this pet going to be a gift? ☐ YES ☐ NO

Does the entire family want to adopt a dog at this time? ☐ YES ☐ NO

Who will be the primary caretaker of your new dog? _____

Do you have a fenced in yard or kennel run? ☐ YES ☐ NO

If yes, please state which and provide the size of the area, the height of the fence, and the fence material:

_____

If you do not have fenced in yard, how will you handle your new dog's exercise and toilet needs?

_____

Where will this dog be kept: ☐ Indoors ☐ Outdoors ☐ Outdoor Kennel ☐ Crate ☐ Tied-Out
(check all that apply) ☐ Garage ☐ Basement ☐ Kennel Run ☐ Fenced Yard

Where will this dog be kept when you are not at home? _____

If you move where dogs are not allowed, what would you do with the dog?:

_____

Have you ever had to rehome a pet? ☐ YES ☐ NO If yes, please share the circumstances:

_____

Do you have any life changing events planned in the near future? ☐ YES ☐ NO

(Marriage, Divorce, Children, Moving, etc) If yes, please share how you will navigate this with a new pet:

_____

It may take your new dog several weeks or more to adjust to your home (depending on the animal and your household). Are you willing to give this dog ample time to adjust? ☐ YES ☐ NO

How will you reprimand your dog? _____

Will your new dog be crate trained? ☐ YES ☐ NO

Will you consider dog obedience classes? ☐ YES ☐ NO

Are you prepared for chewing, digging, scratching, housetraining, & mischievous behaviors? ☐ YES ☐ NO

What behavior would cause you to return the dog to Pet Project? _____

Do you have the time and physical ability to exercise a dog? ☐ YES ☐ NO

Are you able to commit to owning a dog for its complete lifespan, 10-15 years? ☐ YES ☐ NO

Will your dog be kept on heartworm preventative? ☐ YES ☐ NO

Do you understand that the law requires every dog to be protected against rabies? ☐ YES ☐ NO

Do you agree to keep a collar bearing identification on your dog? ☐ YES ☐ NO

What will you feed your dog? _____

How many times a day will you feed your dog? _____

Please list your current veterinarian _____ City _____

How did you hear about our adoption program?

☐Pet Finder ☐Friend/family ☐Newspaper ☐RadioStation ☐Facebook ☐Other _____

My signature below certifies that I have read and understand the following:

1. That the above statements about myself and my history with companion animals are true and correct. I understand that PPI reserves the right to refuse any applicant for any reason at any time. Any misrepresentation of facts will result in my application being rejected. By signing this document I verify that I am of 21 years. of age or older. My signature to this application also allows my present (or previous) veterinarian or animal hospital/clinic to release the requested information to a PPI volunteer regarding my current or previously owned pets for the purpose of my eligibility in adopting a new pet.

2. I will not hold PPI or any of its volunteers or representatives responsible for any damage/injury to myself/family members/others or my property incurred once the animal has been released from their care.

I certify that the above information is true and correct:

Signature _____ Date _____