

APPLICATION FOR ADOPTION



I am looking for a: DOG CAT PUPPY KITTEN [AAP Name: _____]

Breed: _____ Sex: M F Either Approximate Age: _____

Color(s): _____ Housebroken: Yes No Crate or Litter Trained: Yes No

If looking for a dog, what type do you prefer: Companion Hunter Guard "Couch Potato"

Size of dog when fully grown: "Lap Dog" Medium (Cocker/Sheltie) Large (Lab/Collie) Very Large

Adopt-A-Pet requests that you answer the following questions about you and your living environment as honestly as possible. This will enhance our chances of successfully matching you with an appropriate pet, and will reduce the possibility of your later having to return the animal.

1. What are the ages of children in the household? _____

2. Are there elderly or disabled persons in the household? Yes No If Yes, please describe your situation:

3. Have you had a dog or cat previously? Yes No If Yes, what happened to it/them? _____

4. If you presently have any pets describe them: _____
_____ If these pets are dogs or cats, are they spayed or neutered? Yes No N/A

5. Do you routinely have your pets vaccinated? Yes No

6. What is the name and location of your Veterinarian? _____

7. Will the dog/puppy usually be indoors? Yes No How long will it be alone daily? _____

8. Do you have a fenced yard? Yes No If not, how will you control your dog outside? _____

9. Do you live in a: House Apartment Other (describe) _____

10. If you rent or lease an apartment, etc., do you have permission to keep a pet? Yes No Uncertain
If Yes, list any restrictions as to breed, weight, etc.: _____

11. If applicable, give Landlord's name, address and phone no.: _____

12. Have you ever been rejected for pet-adoption by us, or any other shelter, society, pound, etc.? Yes No
If Yes, when and where (please explain): _____

CERTIFICATION and SIGNATURE:

I certify that I am at least 18 years of age. I have no objection to spaying/neutering or micro-chipping my adopted animal in compliance with Illinois law. I have answered all the above questions truthfully to the best of my knowledge.

Please PRINT your name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ / _____ E-Mail (optional) _____

Legal Signature of Applicant: _____ Date: _____

Action/Disposition: APPROVED REJECTED HOLD FOR: _____

If REJECTED, reason: _____

Authorized by: _____ Date: _____

**ATTACH APPROVED APPLICATIONS TO THE COMPLETED ADOPTION AGREEMENT.
RETAIN REJECTED APPLICATIONS IN OFFICE FILE FOR POSSIBLE FUTURE REFERENCE.**