

# PAWS & More Animal Shelter Small Animal Adoption Application

Name of Animal: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for considering adoption. The questions below simply help PAWS & More ensure that we make a great match. Please remember that adoption is a lifetime commitment. We strongly suggest that pets meet all humans and other pets (if applicable) living in the household prior to adoption.

## PAWS & More Animal Shelter Reserves The Right to Refuse Any Adoption

### PAWS & More Animal Shelter Small Animal Adoption Requirements

- Be at least 18 years of age.
- All the adults living in your household know about the pet and agree that it can live there.
- Understand that no animals will be adopted for consumption or research. (PAWS only adopts animals as family pets.)
- For the safety of the animal, agrees to take the animal home in a pet carrier. (These items may be purchased in advance or at the time of adoption.)

### Section 1 — Adopter Information

Name: \_\_\_\_\_

Email: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home or Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Emergency Contact (Outside of Your Household) Name: \_\_\_\_\_

Home or Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Where do you live:  House  Apartment  Condo  Town Home  Duplex  Dorm  Farm

Do you:  Own  Rent (Landlord's Name & Phone: \_\_\_\_\_)  Live with Parents

Have you adopted from PAWS & More Animal Shelter before?  Yes  No

Have you ever been refused adoption from PAWS & More or any other shelter?  Yes  No

If yes, why? \_\_\_\_\_

Have you ever been involved with the Animal Control Department?  Yes  No

If yes, what were the circumstances? \_\_\_\_\_

### Section 2 — Household Details

1. How many adults live in your household? \_\_\_\_\_ How many children? \_\_\_\_\_

What are the children's ages? \_\_\_\_\_

2. Do any household members have allergies? \_\_\_\_\_

3. What will be the pet's role in the family? Please check all that apply.

Companion  Gift  For Child  For Parent  Companion for Another Pet

Business Mascot  Therapy Animal

4. Have you had any pets in the last five years?  Yes  No

Are there any pets in the home now?  Yes  No If yes, please fill out the chart below:

Type/Breed	Kept Where	Age	Spayed/Neutered	Vaccinated	Still Own	If not, why?

5. Who is your current veterinarian and/or who will be this animal's veterinarian? \_\_\_\_\_  
 Phone number of vet: \_\_\_\_\_
6. If you move in the future, what will you do with this animal and any other pets? \_\_\_\_\_  
 \_\_\_\_\_
7. What behaviors are you not willing to manage or work through with a trainer that would result in returning the animal to the shelter?  
 Destructive Clawing  Destructive Chewing  Inappropriate Eliminating (Misses Litter Pan)  
 Aggression to People  Aggression to Other Animals  
 Medical Issues  Keeps You Awake at Night  Other \_\_\_\_\_

**Section 3 — Role in the Family**

The purpose of this section is to remind you of the many responsibilities of becoming a pet owner. After you complete this section, you may have some questions about caring for your new pet. An adoption counselor will be happy to try to answer them for you.

1. Do you know that regular preventative care may cost over \$200 annually for a small animal?  Yes  No  
 2. Did you know that pet supplies such as food and litter/bedding may cost over \$500 per year?  Yes  No  
 3. About how many hours per day will this pet be alone without human companionship? \_\_\_\_\_  
 4. Where will this pet be kept during the day? \_\_\_\_\_  
 \_\_\_\_\_

At night? \_\_\_\_\_

5. Do you plan to let this pet outside?  Yes  No  
 If yes, what type of enclosure will you provide for safety? \_\_\_\_\_  
 \_\_\_\_\_

6. Do you know that a small animal can live a long time, sometimes up to 10 years?  Yes  No

7. How will you handle these situations if they should occur:  
 Destructive Clawing: \_\_\_\_\_  
 Destructive Chewing: \_\_\_\_\_  
 Inappropriate Eliminating (Misses Litter Pan): \_\_\_\_\_  
 Keeps you awake at night: \_\_\_\_\_  
 Shows aggression toward people or other animals: \_\_\_\_\_

**PAWS & More will be glad to help you try to resolve any of these issues if they should occur.**

8. Are you willing to give ample time, approximately two weeks, for your new pet to adjust?  Yes  No

**Section 4 — Application Agreement: Email completed form to Washingtonpawsandmore1978@gmail.com or bring to the shelter.**

By typing or signing name below, I verify that the information on this application is true and I recognize that any misrepresentation of facts may result in my losing the privilege of adopting or keeping an adopted pet. I understand that PAWS & More has the right to deny my request to adopt. I authorize the investigation of all statements in this application.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

PAWS Staff Only: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
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