



**HUMANE  
SOCIETY**  
OF THE DESERT  
Making a Difference

## DOG ADOPTION APPLICATION

*ADOPTEE INFORMATION:*

Name \_\_\_\_\_ Breed \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

*ADOPTER INFORMATION:*

NAME \_\_\_\_\_ DRIVERS LICENSE # \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_ CELL # \_\_\_\_\_

Do you rent? \_\_\_\_\_ If yes, landlord phone# \_\_\_\_\_

Do you own your home? \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Please identify other pets in your household?  
\_\_\_\_\_

Are they spayed/neutered? \_\_\_\_\_ If not please explain why \_\_\_\_\_  
\_\_\_\_\_

Please list previous pets and what happened to them (died of old age, lost, given away, stolen)  
\_\_\_\_\_

Have you ever turned in an animal, other than a stray to a shelter? \_\_\_\_\_

If so explain why \_\_\_\_\_

Have you ever adopted from the HSOD before? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, when and what happened to the animal? \_\_\_\_\_

How many children live in your home? \_\_\_\_\_ List ages: \_\_\_\_\_

Is someone home during the day? \_\_\_\_\_ During what hours? \_\_\_\_\_

If employed, do you anticipate a transfer out of state? \_\_\_\_\_

Would you take the dog with you? \_\_\_\_\_

What provisions will you make for this dog should you become unable to care for it?  
\_\_\_\_\_

Name of present veterinarian: \_\_\_\_\_



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Why do you want to adopt this dog?  
\_\_\_\_\_

Do you understand that there may be an adjustment period before the dog forms a relationship with you and/or your family? \_\_\_\_\_

Do you understand adjustments include housetraining and acclimation to a new environment?  
\_\_\_\_\_

Do you understand that rescues may have behavioral problems that can be rectified thru daily exercise, discipline and affection (in that order) \_\_\_\_\_

Do you have a fenced yard? \_\_\_\_\_ Fence Height \_\_\_\_\_ Where will dog sleep? \_\_\_\_\_

Where will dog stay when you are away during the day? \_\_\_\_\_

How many hours during the day will the dog be without human companionship? \_\_\_\_\_

Do you have a pool? \_\_\_\_\_ If so is it fenced? \_\_\_\_\_

Under which circumstances, if any would you give up this dog?

New Baby \_\_\_\_\_ Allergies \_\_\_\_\_ Financial \_\_\_\_\_ Illness of Pet \_\_\_\_\_ Behavioral Problems \_\_\_\_\_

Does any person living within the home have allergies? \_\_\_\_\_

If you travel, who will take care of the dog? \_\_\_\_\_

Are you prepared for veterinary expenses, such as emergency medical care, that may occur when owning a pet? \_\_\_\_\_

Are you aware that a representative from the Humane Society of the Desert may visit your home after the adoption for verification of safe living condition and a loving environment? (Within 60 days after adoption date?) \_\_\_\_\_

Any false information given on this application will result in a "voided" application and adoption.

I certify that I have answered all questions honestly and to the best of my ability.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Humane Society of the Desert Approval

\_\_\_\_\_  
Date