

# MISSION VIEJO ANIMAL SERVICES DOG ADOPTION APPLICATION



Dog's name \_\_\_\_\_ Kennel # \_\_\_\_\_

Please answer every question in order for your application to be considered. Completing an application is not a guarantee of adoption.

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

Street address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Home phone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_ (Email will only be sent for notification of special events)

Are you the head of household? \_\_\_\_\_ (If no, the head of household **must** be present when turning in the application)

Please list ALL of the pets you have had in the past 5 years and those you currently own.

<u>Type/Breed</u>	<u>Age</u>	<u>Sex</u>	<u>Spayed/Neutered</u> (yes or no)	<u>Licensed</u> (yes or no)	<u>Where is this pet now?</u> (If pet died, please list at what age and reason)
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

What is the reason for adopting this dog? (Check all that apply)

Personal or family companion \_\_\_\_\_ Companion for other pet \_\_\_\_\_ For children \_\_\_\_\_ Gift \_\_\_\_\_ Guard dog \_\_\_\_\_

What characteristics are you looking for in a dog? (Check all that apply)

<input type="checkbox"/> Active	<input type="checkbox"/> Affectionate	<input type="checkbox"/> Mellow	<input type="checkbox"/> Quiet
<input type="checkbox"/> Playful	<input type="checkbox"/> Independent	<input type="checkbox"/> Outgoing/Sociable	<input type="checkbox"/> Lap dog
<input type="checkbox"/> Good with other dogs	<input type="checkbox"/> Good with other animals	<input type="checkbox"/> Good with children	

Do you live in a: House \_\_\_\_\_ Townhome/Condo \_\_\_\_\_ Apartment \_\_\_\_\_ Duplex \_\_\_\_\_ Mobile home \_\_\_\_\_

Do you: Own \_\_\_\_\_ Rent \_\_\_\_\_ Landlord Name/Number: \_\_\_\_\_

Are you prepared to pay any required pet deposits or pet rent? \_\_\_\_\_

If you move (locally, out of state, or out of the country) what will you do with this dog? \_\_\_\_\_

Do you have a fenced: Yard \_\_\_\_\_ Patio \_\_\_\_\_ Both \_\_\_\_\_

If you do have fencing, what type is it? \_\_\_\_\_ What is the fence height at the lowest point? \_\_\_\_\_

Do you have a pool? \_\_\_\_\_ If yes, is the pool gated? \_\_\_\_\_

How many adults are in your household? \_\_\_\_\_ Ages: \_\_\_\_\_

How many children? \_\_\_\_\_ Ages: \_\_\_\_\_

Has every member of your household agreed to adopt this dog? \_\_\_\_\_

If this has not been discussed at great length, please complete application when that has occurred.

Does any member of your household have allergies or asthma? \_\_\_\_\_ If yes, please describe: \_\_\_\_\_

What is the activity level in your household? Mellow (quiet) \_\_\_\_\_ Moderate \_\_\_\_\_ Active (loud, busy) \_\_\_\_\_

Is someone home during the day? \_\_\_\_\_ If so, who? \_\_\_\_\_

How many hours will this dog be alone each day? \_\_\_\_\_

Where will this dog be kept when it is left alone? \_\_\_\_\_

Where will this dog be kept when you are home? \_\_\_\_\_

Where will this dog sleep at night? \_\_\_\_\_

Who will care for this dog when you are on vacation or out-of-town? \_\_\_\_\_

The annual cost associated with providing responsible care (vaccinations, medical care, boarding, supplies, etc.) to a healthy dog is approximately \$800. Do these costs present any financial problems for you? \_\_\_\_\_

Are you willing to potty train this dog if needed? \_\_\_\_\_

Are you willing to take this dog to training classes if needed? \_\_\_\_\_ If yes, do you know where? \_\_\_\_\_

Are you prepared to make a commitment of 10 to 18 years to this dog? \_\_\_\_\_

Which reasons may prompt you to relinquish, return, or rehome your dog? (*check all that apply*)

- Illness                       Allergy                       Moving                       Potty accidents/unable to potty train
- Biting                       Growling                       Marking in house                       Chewing/destructive behavior
- Too active                       Fencing jumping                       Hides for a week                       Digging
- Barking                       Non-compatible with other pets                       None
- Other (explain) \_\_\_\_\_

Have you ever had to give up a pet? \_\_\_\_\_ If yes, when and why? \_\_\_\_\_

If your dog gets sick, what will you do? \_\_\_\_\_

Do you have a current veterinarian? \_\_\_\_\_ If yes, list name and phone number: \_\_\_\_\_

Have you adopted any animals from Mission Viejo Animal Services before? \_\_\_\_\_  
If yes, do you still have this/those animal(s)? \_\_\_\_\_

Have you completed an application to adopt an animal from our shelter in the past 12 months? \_\_\_\_\_  
If yes, which animal (name)? \_\_\_\_\_

Your application will be reviewed along with all others received by Animal Services personnel to ensure that the best home possible is selected for this animal. Animals are **NOT** adopted solely on a **first come—first served basis**. The completion of this application is not a guarantee of adoption.

**Incomplete applications forms are grounds for denial of adoption**  
**We Reserve the Right to Refuse the Adoption of any Animal**

I hereby certify that the above answers are true, to the best of my knowledge, and I understand that if approved, I must sign and abide by an Adoption Agreement.

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

