

MUTT LOVE RESCUE
PO Box 1005 Fairfax, VA 22038
www.muttloverescue.org

adopt@muttloverescue.org, 703 / 988-2608 (fax)

ADOPTION APPLICATION

The purpose of the application process is to find the best possible match for both the dog and the adoptive person/family and we do not adopt on a first-come, first-serve basis. You may submit one application for multiple dogs. You must be over the age of 21 years for your application to be considered. Please submit your application by email or fax (above). You will receive a response within 48 hours. Thank you.

Dog you're interested in (if more than one, please list in order of preference): _____

What appeals to you about him/her/them? _____

ABOUT YOU

Name: _____

Street address and apt. number (if applicable): _____

City, State, Zip: _____

Phone: _____ (home) _____ (work) _____ (cell)

Email/s: _____

Referred by: _____

1. Number of children: _____ Ages: _____ In future? () yes () no

2. People in household (please list names and relationship to you of all people who reside in the home): _____

3. Place/s and length/s of employment of all adults: _____

4. Home: urban suburban rural
- single family home townhouse apartment or condo
- own rent
5. How long at current residence? _____
6. If renting: Does your lease allow pets? yes no
- Does lease contain any size/breed restrictions? yes no
- Please bring a copy of lease with you to the interview.*
7. Fenced yard? yes no partially
- If yes, fence type wood chain link other: _____
- Fence height? _____
- Is fence attached to your home? yes no
- Do you have locks on the gates? yes no
- If no, are you willing to fence? yes no
- If yes, when? _____
- Type of fence contemplated? _____
8. Dog door? yes no in future
9. Do you use a lawn service to maintain your yard? yes no
10. Do you have a pool? yes no
11. Any plans to move in the foreseeable future? yes no. If yes, what will you do with your pets? _____
- _____
12. Does anyone in your household have any allergies to pets? yes no. If yes, please explain: _____
- _____

13. Canine companion I/we have in mind: () puppy () young adult () mature adult () senior () special needs

Size: () under 25 lbs. () 26 – 50 lbs. () 51 – 80 lbs. () giant

Energy level: () very active () moderately active () couch potato/TV pal

14. Why did you decide to get a dog at this time? _____

15. Have you previously applied to adopt a dog from Mutt Love or any other rescue group or shelter? () yes () no. If yes, when? _____

YOU AND YOUR NEW FAMILY MEMBER

1. Who will be the primary caretaker of the dog? _____

Who will walk the dog? _____

Who will feed the dog? _____

2. How many weeks are you generally away on vacation or business travel each year? _____

3. Who will care for the dog in your absence? _____

4. Will your dog ever travel with you? () yes () no

5. Where will your dog sleep (please be specific): _____

6. Where will your dog be exercised on leash? _____

7. Do you use or have you ever used retractable leashes? () yes () no

8. Where and how will your dog be exercised off leash (please specify all occasions and locations)? _____

9. Number of hours your dog will be left alone on work days and on weekends (please specify times): _____

10. Where will your dog be left *when you are not home*? () crated () free roam of house () confined to portion of house (please specify): _____
() outdoors () other (please explain): _____

11. Where will your dog be kept *when you are at home*? () crated () free roam of house () confined to portion of house (please specify): _____
() outdoors () other (please explain): _____

12. If left outdoors when you are not home, when will s/he be left out? () not applicable () always () sometimes () only when the weather is good () other (please explain): _____

13. How much time will you and your family have to play with the dog on a normal work day? _____; weekend day? _____

14. What kind of toys or treats have you used in the past or plan to use with your new dog? _____

15. What brand/kind of food have you used previously or anticipate feeding your new dog? _____

16. Have you dealt with behavior issues previously with a dog? () yes () no. If yes, please describe: _____

17. Are you willing to get professional training for your dog if s/he would benefit from it? () yes () no

18. Are you willing to keep your dog on heartworm preventative *every* month, year around? () yes () no. What causes heartworm in dogs? _____

19. How much do you think it costs annually to own a dog?

Medical: _____ Food and supplies: _____

20. Describe any and all circumstances which may cause you to return your adopted dog (please include possible situations relating to both you and your dog):

21. If you had to give up your dog, would you: () find a him/her a new home () give to family member () take to animal shelter () return to Mutt Love () other (please explain): _____

PET HISTORY

1. Do you *currently* own a pet of any kind? () yes () no. If yes, please complete the following section for *each* pet, using a separate sheet of paper if necessary.

Pet's name? _____ () Dog (breed) _____
() Cat () Other _____ Age? _____ Gender? () M () F
Spayed/neutered? () yes () no. What year did you get the pet? _____
How/where did you get the pet? _____
Comments: _____

Pet's name? _____ () Dog (breed) _____
() Cat () Other _____ Age? _____ Gender? () M () F
Spayed/neutered? () yes () no. What year did you get the pet? _____
How/where did you get the pet? _____
Comments: _____

2. Have you had pets of any kind *in the past* (you need not include family pets from childhood)? () yes () no. If yes, please complete the following section for *each* pet, using a separate sheet of paper if necessary.

Pet's name? _____ () Dog (breed) _____ () Cat
() Other _____ Gender? () M () F Spayed/neutered? () yes () no.
What year did you get the pet? _____ Age of pet at time: _____
How/where did you get the pet? _____
Year pet died or left your home: _____ Cause of death or present
whereabouts of pet (please provide details): _____

Pet's name? _____ () Dog (breed) _____ () Cat
() Other _____ Gender? () M () F Spayed/neutered? () yes () no.
What year did you get the pet? _____ Age of pet at time: _____
How/where did you get the pet? _____
Year pet died or left your home: _____ Cause of death or present
whereabouts of pet (please provide details): _____

Pet's name? _____ () Dog (breed) _____ () Cat
() Other _____ Gender? () M () F Spayed/neutered? () yes () no.
What year did you get the pet? _____ Age of pet at time: _____
How/where did you get the pet? _____
Year pet died or left your home: _____ Cause of death or present
whereabouts of pet (please provide details): _____

3. Have you ever had to give up a pet in the past? () yes () no. If yes, please explain why: _____

