

Animal # \_\_\_\_\_ Approved  Not Approved   
YVAS Staff Initial \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_ YVAS Staff Init. \_\_\_\_\_

On Hold Pending: Landlord Approval  Dog Meet  Family Meet  Home Visit  Management Approval  Other \_\_\_\_\_

Details of Hold (Date, Time, Etc.): \_\_\_\_\_  
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# Yellowstone valley Animal Shelter

## DOG ADOPTION QUESTIONNAIRE

Name \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (1) \_\_\_\_\_ Phone (2) \_\_\_\_\_ E-Mail \_\_\_\_\_

Do you currently live in a House  Apartment  Condo  Trailer  Other \_\_\_\_\_

Do you currently Own  Rent  Lease  Rent/Lease Lot/Land

If you rent residence or land, what is the pet policy? \_\_\_\_\_

Landlord or Rental Agency Name \_\_\_\_\_ Phone \_\_\_\_\_

For Office Use Only:

Date Landlord Called \_\_\_\_\_ Pet(s) OK? Yes  No  YVAS Staff Initial \_\_\_\_\_

Comments \_\_\_\_\_

How long have you lived at your current residence? \_\_\_\_\_

How many adults live in your home? \_\_\_\_\_ How many children? \_\_\_\_\_ Age(s) of children? \_\_\_\_\_

Does anyone in your household have pet allergies? Yes  No

What attracts you to this dog? \_\_\_\_\_

How long have you been looking for a new pet? \_\_\_\_\_

Who will be primarily responsible for the care of this dog? \_\_\_\_\_

When you are out of town, who will be the dog's primary care giver? \_\_\_\_\_

Is this dog a gift? Yes  No  If yes, for whom? \_\_\_\_\_

Which of the following best describes your reasons for wanting this dog? (check all that apply)

- Companion  Watch Dog  Hunting  Breeding  Agility
- Jogging/Walking Buddy  Obedience Training  Search & Rescue  Couch Warmer

Is this dog a companion? If yes, for who/what? \_\_\_\_\_

How many hours will the dog be alone (without a person) each day? \_\_\_\_\_

Where will the dog be kept when no one is home? \_\_\_\_\_

Where will the dog be kept at night? \_\_\_\_\_

Do you have a fenced yard? Yes  No

If yes, how high is your fence? \_\_\_\_\_

Type of fence? Chain Link  Wood Panel  Vinyl  Range Fence

Barb Wire  Picket  Other \_\_\_\_\_

If no, what is your plan for containment and exercise? \_\_\_\_\_

If you have other pets: are their vaccinations current? Rabies  Distemper

Do you have a veterinarian? Yes  No

Veterinary Clinic Name \_\_\_\_\_

I like dogs that are: Small  Medium  Large  Any Size

Describe the temperament and activity level you are looking for in a dog (check all that apply):

- High Energy       Lap Dog       Mellow       Affectionate   
 Outdoorsy       Quiet       Guard/Watch Dog

I prefer a dog that... (check all that apply)

- Loves all other animals       Loves children and strangers       Can tolerate children and strangers   
 Can tolerate all other animals       Don't care if my dog gets along well with other animals

When it comes to relating to dogs, I tend to be more:

- Strict, Demanding       Moderate       Lenient, Easily coerced by the dog's cuteness

Someone in my home is nervous or unsure of dogs:      Very       Moderately       Some       N/A

The noise/activity level in my home is usually:      High       Medium       Low

I would enjoy brushing or grooming my dog:      Rarely       Occasionally       Often

I would prefer a dog that:

- Would enjoy walking with me on a leash       Would enjoy going to the dog park   
 Would run, jog or hike with me       Will exercise him/herself in our yard   
 Requires only enough exercise to do his/her business

I need a dog that will tolerate being alone \_\_\_\_\_ hours a day.

My ideal dog would: \_\_\_\_\_

Bad dog habits that I just can not tolerate are:      Barking Excessively       Not House-trained

- Jumping       Being on Furniture       Digging       Won't stay in yard

Chasing Cats/livestock       Other \_\_\_\_\_

When you move, what do you plan to do with this dog? \_\_\_\_\_

Under what circumstances would you NOT keep this dog? \_\_\_\_\_

List the pets you have had in the last 10 years including current pets and those you no longer own:

Breed or animal type	Age	Sex M/F	Spayed/Neutered		Owned how long?	Does the pet still live with you? If not, what happened to him/her?
			YES	NO		
			YES	NO		
			YES	NO		
			YES	NO		
			YES	NO		
			YES	NO		
			YES	NO		
			YES	NO		

Signed \_\_\_\_\_ Date \_\_\_\_\_

	Date	Initials	Comments
Landlord Check			
Chameleon Check			
Dog Meet			
Family Meet			
Cat Tested			
Address Verified			

Comments: