

New Leash on Life – Randolph County Animal Shelter
Adoption Application

Thank you for considering a shelter dog! Dogs who have gone through the New Leash on Life program have had a considerable amount of care and time devoted to them. We want to ensure that they find owners who are committed to their continued success. Please fill out the following application. Approved adopters should be prepared for a home visit. Because of the low number of dogs going through the program at a time, we'll be happy to keep your application on file and consider you for the next available dog. Best of luck!

Adoptable Dog's Name: _____

Today's Date _____

Your Name _____

Address _____

City State, ZIP Code _____

Home phone: (_____) _____

Cell phone: (_____) _____

Work phone: (_____) _____

E-Mail: _____

The best way to reach you: Home phone Work phone Cell phone email

Veterinarian Information: (if you do not currently own an animal but have owned one in the past, please use that veterinarian)

Please provide at least two additional references along with phone numbers and/or email addresses:

Why have you decided to adopt a dog from RCAS-New Leash on Life?

Are you willing and able to commit to 10+ years of dog care, including veterinary care and follow up training?

If you are approved as a New Leash on Life adopter, but are not selected for the current dog, would you like to be put on a waiting list for the next cycle?

Do you have a fenced yard?

Yes: Please describe fenced area and fence type:

No: Please explain how you will contain your dog:

Do you own any pets? Yes No
If so, please list each pet in home:

Are all of your current pets spayed or neutered? If not, why not?

Are all of your current pets on monthly heartworm preventative and up to date on vaccinations?

Please describe each of your pet's personalities.

If you own cats, have they been exposed to dogs?

Yes, and they are comfortable with one another

Yes and they don't get along

No

I don't own any cats.

Have you ever owned a dog that is no longer living with you? Yes No

If yes, please explain what happened to the dog:

Have you ever surrendered a pet to an animal shelter or given a pet away? If so, please explain the circumstances.

Have you ever visited a dog trainer or engaged in any basic obedience training with your pets?

Are you willing to follow up with the dog trainers associated with New Leash on Life?

Please list the members of your household, along with their age and relationship to you.

When you have visitors, how do you plan to introduce them to your new pet?

How have you taught your children (or how would you teach visiting children) to interact with a dog?

Who will be the primary caregiver for this dog? Who will care for the dog when the primary caregiver is away – at work or on vacation?

How many hours will the dog be left at home alone during the day? Where will the dog be kept during those hours?

Do you own your home or rent? Own Rent

If you rent, is your landlord agreeable to having a dog? Yes No

Please provide name and telephone number of landlord:

Where will the dog sleep?

How will you provide exercise for your dog?

The information provided in this application is true to the best of my knowledge as of the date of the application.

Applicant's Signature: _____