Small Animal ADOPTION Application

Portage Animal Protective League

8122 Infirmary RD \* PO Box 927 \* Ravenna OH 44266 \* 330-296-4022 PH \* 330-296-8648 FAX

[www.portageapl.org](http://www.portageapl.org) \* info@portageapl.org

\*We reserve the right to approve or deny any adoption.

ARE YOU A: 🞏VETERAN 🞏FIRST RESPONDER (Police/Fireman/EMS/911 Dispatcher) (We will require proof/documentation.)

GENERAL INFORMATION:

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State \_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are your reasons for adopting today? (Please check all that apply)

🞎 Companionship 🞎 Child’s Pet 🞎 Family Pet 🞎 Playmate 🞎 Companion for another pet(s) 🞎 Gift

Have you spent any time with the animal here at the shelter? 🞎 Yes 🞎 No

ANIMAL/PET INFORMATION:

Are there other pets in the household? 🞎 Yes 🞎 No (If yes, please complete the following.)

What other animals are in the home? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where do the animals primarily live? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In the past, have you had pets that did not work out for you? 🞎 Yes 🞎 No If yes, please explain why \_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The life expectancy of small animals can vary between 3-15 years? Are you willing to take responsibility for animal’s entire life? 🞎 Yes 🞎 No

Where will the animal stay during the daytime \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ nighttime \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_?

How will you address potential hazards such as wild animals, electrical cords/wires, poisonous plants, injury from falling, heart attack from fear to make sure this animal is safe in your home? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you understand that small animals require an entirely different diet than dogs and cats and will require fresh fruits and vegetable to remain healthy? 🞎 Yes 🞎 No

It is strongly recommended that small animals have a complete health check with a small animal veterinarian annually. Are you willing to do this? 🞎 Yes 🞎 No

FAMILY INFORMATION:

Are their children in the home? 🞎 Yes 🞎 No

If yes, how old are they? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If no, how often do children visit your home? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Small animals are very fragile. Have the children been properly educated on how to treat/care for and interact with animals? 🞎 Yes 🞎 No

**Our goal is to ensure a forever home for each pet that is adopted.**

**I understand the above questions, and by signing this application, I am stating that the above-mentioned is true.**

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Please Print Name*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Signature Date*

For Shelter Use Only:

🞎 Approved 🞎 Denied Staff Member’s Initials \_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: