

Dog Adopter Survey



Given name:	Last name:	Date:
Address:	City:	Postal code:
Main phone:	Other phone:	Email:

- A – Are you adopting this dog for yourself? YES NO
- B – Indicate your age group: under 18 18 to 29 30 to 44 45 to 65 over 65
- C – How many people **in total** live in your household? _____
- D – Do you want your animal to be spayed or neutered? YES NO
- E – Do you live in an apartment or condominium? YES NO
- If yes, on which floor? _____

Circle all that apply :

1	I have already owned a dog.	YES	NO			I currently own dog(s).
2	If yes, the last time I had a dog was...	2 to 10 years ago	Over 10 years ago			Not currently, but within the past year
3	My dog will be living with other dogs.	NO				YES
	If yes, specify their ages, genders and breeds, and whether or not they have been vaccinated and sterilized:					
4	My dog needs to be good with...	Children over 8 years old	Children under 8 years old			Cats Other animals
			Elderly people			
5	My dog will primarily be an...	Inside dog				Outside dog
6	How many minutes or hours a day will you spend walking your dog? _____					
7	My dog needs to be able to be alone (per day)...		8 to 10 hours		3 hours or less	12 hours
			4 to 8 hours			
8	When I'm at home, I want my dog to be by my side...		All the time	Sometimes	Little of the time	
9	When I'm not at home, my dog will be left...	In a crate in the house				Loose in the house
		Outside or in the garage				Confined in a room
10	I want a guard dog	NO				YES
11	I want my dog to show affection in a very enthusiastic way.		Not at all	Somewhat	Very much so	
12	I want my dog to be playful.		Not at all	Somewhat	Very much so	
13	I want my dog to be laid back.		Very much so	Somewhat	Not at all	
14	I am ready to do training with my dog to improve certain behaviours such as pulling on the leash, chewing on objects, soiling in the house, etc.		No training	Some training	A lot of training	
15	I want to do a sport with my dog; such as jogging, agility, flyball, etc.			NO	YES	
16	I am interested in adopting a dog with special needs.			NO	YES	
17	It is most important to me that my dog _____.					
	(Fill in the blank)					
FOR OFFICE USE ONLY :			Purple:	Orange:	Green:	

Paper and/or electronic information contained in this form shall be kept on record at the Montreal SPCA so as to allow the Montreal SPCA to proceed with any follow-up, if necessary, and to ensure the well-being and safety adopted animals. The record kept by the Montreal SPCA is confidential and will only be accessible by the Montreal SPCA's employees and volunteers involved in the adoption process. Inappropriate conduct such as abuse to animals, or repetitive returning of adopted animals can result in an adopting party's name and contact information being added to a list of ineligibility for future adoption. All personal information conserved by the Montreal SPCA shall be kept at the Montreal SPCA's offices located at 5215 Jean-Talon West, Montreal (Quebec) H4P 1X4 and may be consulted upon request during normal business hours. Rectifications may also be made upon request.