

# Alabama SPCA

## Pet Adoption Application

Name of animal are interested in adopting:

1<sup>st</sup> choice: \_\_\_\_\_ 2<sup>nd</sup> choice: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Co-Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Employer (applicant): \_\_\_\_\_

Employer (co-applicant): \_\_\_\_\_

Number of Persons in

Household: \_\_\_\_\_ Adults: \_\_\_\_\_ Teens/Seniors: \_\_\_\_\_ Infants/toddlers: \_\_\_\_\_

Children ages 2-12 \_\_\_\_\_ Are you 21 years of age or older? \_\_\_\_\_

Have you ever adopted a cat or dog? \_\_\_\_\_ If yes, when? \_\_\_\_\_ Do you still have the pet? \_\_\_\_\_ Was the pet altered? \_\_\_\_\_ Was the pet crate trained? \_\_\_\_\_

***Please fill out the following information pertaining to any pets you currently have or have had in the last 16 years.***

Type/Breed of animal (dog/cat/other)	Name of Pet	<u>M</u> ale or <u>F</u> emale	Age	<u>S</u> payed/ <u>N</u> eutered	How long in your care?	Was Pet kept <u>I</u> nside or <u>O</u> utside?

Name of vet clinic: \_\_\_\_\_

Name of veterinarian: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Have you ever been guardian to any animals that were:

Killed by moving vehicles: \_\_\_\_\_ Given Away: \_\_\_\_\_

Turned into a shelter or rescue: \_\_\_\_\_ Lost or Stolen: \_\_\_\_\_

If you answered yes to any of the questions, please explain:

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

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Do you own or rent your home? \_\_\_ Rent \_\_\_ Own

Do you live in a: \_\_\_ House \_\_\_ Condo/Townhouse \_\_\_ Apartment \_\_\_ With  
Parents/Roommates

If you rent, name and telephone of landlord: \_\_\_\_\_

Does anyone in your household have allergies to pet dander/hair/saliva? \_\_\_\_\_

Why do you want to adopt this particular pet?

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Is someone at home during the day? \_\_\_\_\_ Who? \_\_\_\_\_ How many hours will your pet  
be alone? \_\_\_\_\_ How many hours per day will you spend with your pet? \_\_\_\_\_

Where will you keep the pet? \_\_\_\_\_ At night? \_\_\_\_\_ When traveling? \_\_\_\_\_

Will you let the pet outside? \_\_\_\_\_ Will you walk your dog? \_\_\_\_\_ #Days/week \_\_\_\_\_

What do you feed your current (or past) pets? \_\_\_\_\_

Do you have a boarding facility that you use? If so, please provide name, address, contact  
information [phone, website, email]. \_\_\_\_\_

Because it is very stressful for a pet to go from home to home, we hope to place each one in a  
caring home for the rest of its life, which could be up to 20 years. Are you prepared for this  
commitment? \_\_\_\_\_

What will happen to the pet if you move?

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What if you move to a place that doesn't allow pets?

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This pet may take several weeks or months to fully adjust to you and your home. How would  
you ease the adjustment?

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Other pets current on vaccinations? \_\_\_ heartworm prevention \_\_\_ flea control \_\_\_

What kind of behavior do you find unacceptable?

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How would you handle these behaviors? \_\_\_\_\_

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Do you believe in spaying or neutering? \_\_\_\_\_

How much do you think it will cost per year to vaccinate, feed and care for this pet? \$ \_\_\_\_\_  
What would cause you to return this pet to the Alabama SPCA?

\_\_\_\_\_

\_\_\_\_\_

Under what conditions would you consider euthanasia? \_\_\_\_\_

\_\_\_\_\_

Please take a minute to review you answers and provide any further comments or questions.  
Which of these subjects would you like to learn more about?

Feeding/Nutrition       Litter training       Scratching/Declawing

Upper respiratory infection       Grooming/Fleas       Feline Leukemia & Feline AIDS

Household dangers       Urinary tract problems       Introducing new pet to other pet

Introducing new pet to children       Outside dangers

Other \_\_\_\_\_

Please provide two personal references whom we may contact. Include name, address, and phone numbers.

Ref 1: \_\_\_\_\_

Ref 2: \_\_\_\_\_

All questions *must* be answered before the application can be accepted for review by the Alabama SPCA adoption agent.

By my/our signature on this document, I/we certify that the above statements about me/us and my/our history with companion animals are true and correct. I/We understand that the Alabama SPCA reserves the right to refuse any applicant based on its adoption rules and guidelines. Any misrepresentation of fact may result in my/our application being rejected and any and all fees shall be forfeited.

My signature on this document also permits my present or previous Veterinarian or Animal Hospital to release requested information to an Alabama SPCA volunteer/adoption agent regarding my current or previously-owned pets for the purpose of considering my application. I am/We are aware that prior to placement of a pet from the Alabama SPCA, my currently-owned pets, for their protection, must be up to date on needed vaccinations including: rabies, distemper shots, heartworm prevention and in some cases feline leukemia and feline aids tests.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Co-Applicant Signature**

\_\_\_\_\_  
**Date**

The Alabama SPCA is a not-for-profit corporation operating in the state of Alabama, 501(c)3. Incorporation 2011-1677, State of Alabama, Tuscaloosa County.

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