## **Rocket Dog Rescue Application**

Prospective Adopter / Foster Care Provider (circle one / both)

| Date:                       | Animal of Interest:                        |                       | Foster Parent:                        |                  | RDR Tag          | #: <u> </u> |
|-----------------------------|--|-----------------------|---------------------------------------|------------------|------------------|-------------|
| Event                       | Breed Description/                         | Color                 |                                       | Age              | Mal              | e/Female    |
| <b>ABOUT YO</b>             |  |                       |                                       |                  |                  |             |
| 1. YOUR Na                  | me   |                       |                                       | YOUI             | R Age            |             |
| 2. Home Add                 | dress:                                     |                       |                                       |                  |                  |             |
| City                        |  | CA, ZIF               | )                                     | ·                |                  |             |
| Mailing A                   | ddress if applicable                       |                       |                                       |                  |                  |             |
| How long                    | have you lived at your cu                  | rrent address?        |                                       |                  |                  |             |
| If less tha                 | n 2 years list previous ad                 | dress:                |                                       |                  |                  |             |
| Street:                     |  |                       | City                                  |                  | Zip _            |             |
| <ol><li>Email add</li></ol> | resses                                     |                       |                                       |                  |                  |             |
| 4. Telephone                | e Home:<br>on                              | Cell:                 |                                       | Other            | •                |             |
| 5. Occupation               | n  | 6                     | . Employer                            |                  |                  |             |
| 7. Driver lice              | nse or other permanent I                   | D number              |                                       |                  |                  |             |
| 8. Please lis               | t two personal references                  | that we may contact   | ct:                                   |                  |                  |             |
| Name                        |  | Relations             | ship                                  | Phon             | e                |             |
| Name                        |  | Relations             | ship                                  | Phon             | e                |             |
| ABOUT YO                    |  |                       |                                       |                  |                  |             |
| 9. How man                  | y TOTAL OTHER PEOPL                        | .E (not including yo  | u) live in your housel                | hold?            | Adults           | Children    |
| Please lis                  | t their names, ages and r                  | elationship to you:   | ,                                     |                  |                  |             |
|                             | , 3  | ' ' =                 |                                       |                  |                  |             |
|                             |  |                       |                                       |                  |                  |             |
| -                           |  |                       |                                       |                  |                  |             |
| 9a. Is everyo               | one in the household in fa                 | vor of adopting or fo | ostering a dog? □YE                   | S □NO            |                  |             |
|                             | yone in the household ha                   |                       |                                       |                  |                  |             |
|                             | e your home □House                         |                       |                                       |                  |                  |             |
| □Owne                       | r □Renter □Sub-let                         | □HOA member           | □Co-op member □                       | 10ther           |                  |             |
|                             | door opens to street                       |                       |                                       |                  |                  |             |
|                             | ird . □Unfenced                            |                       |                                       |                  | enced vard       |             |
|                             | O: Do HOA rules allow p                    |                       |                                       |                  |                  |             |
|                             | ALS: Please attach Land                    |                       |                                       |                  |                  |             |
|                             | your yard □Size                            |                       |                                       |                  |                  |             |
| 0                           | / t t- \                                   |                       |                                       |                  |                  |             |
| Height o                    | (grass, stone, etc.)<br>f fencefeet - Made | of? □Wood □           | □Chain Link □Brick                    | □other           |                  |             |
| Number                      | of gates Gates                             | have locks? □YFS      | □NO Gates ope                         | n on streetsid   | e? ПYFS Г        | INO         |
|                             | access to your yard, bes                   |                       |                                       |                  |                  |             |
|                             | other units, other dogs,                   |                       |                                       | ioarior, orman   | 511, Gainty, 100 | minatoo,    |
|                             | UR EXPERIENCE WITH                         |                       |                                       |                  |                  |             |
|                             | ntly have a dog(s):                        | <u> </u>              |                                       |                  |                  |             |
|                             | you come to have the do                    | n?                    |                                       |                  |                  |             |
|                             | was the dog when you fir                   |                       | How of                                | d is the dog n   | ow?              |             |
|                             | ny TOTAL OTHER PETS                        |                       |                                       | a lo tile dog li |                  |             |
|                             | ER PETS, please answe                      | -                     | · · · · · · · · · · · · · · · · · · · |                  |                  |             |
| Name                        | Gender                                     | _                     | •                                     | Weight           | Nei              | utered Y/N  |
| Haine                       | Gender                                     | Dieeu-descript        | ion Age                               | Weight           | 110              | atered 1714 |
|                             |  |                       |                                       |                  |                  |             |
| -                           |  |                       |                                       |                  |                  |             |
|                             |  |                       |                                       |                  |                  |             |
| 16 How wor                  | uld you describe your leve                 | al of experience with | n dogs? □Never had                    | ladog □Ch        | ildhood net      |             |
|                             | ne or more dogs as an ad                   | -                     | . Gogo. Livevei nat                   | , a dog Lion     | narioud pet      |             |
|                             | ence with dogs  less the                   |                       | he □60+ lhe                           |                  |                  |             |
|                             | ence with specific breeds                  |                       |                                       |                  |                  |             |
| шехроп                      | cco man opcomo brecus                      |                       | · · · · · · · · · · · · · · · · · · · | 015 1            |                  |             |

| □Dog-related business or profession   |   |                           |               |             |  |  |  |  |
|---|---|---------------------------|---------------|-------------|--|--|--|--|
| ☐Foster or rescue experience:Nam  |   |                           |               |             |  |  |  |  |
| <b>GENERAL QUESTIONS (please answ</b>   |   |                           |               |             |  |  |  |  |
| 17. How long have you been thinking a   |   |                           |               |             |  |  |  |  |
|   | 18. What are your primary reasons for wanting to adopt or foster a dog? ☐Security ☐Companionship      |                           |               |             |  |  |  |  |
| □For the children □As a gift for someone □Friend for current pet □Other                                       |   |                           |               |             |  |  |  |  |
| 19. If you do not have a dog now, when was the last time you had a dog?                                       |   |                           |               |             |  |  |  |  |
| 20. What breed was your dog?  |   | Was s/he spayed           | or neutered?  | □YES □NO    |  |  |  |  |
| 21. What happened to the dog?   |   |                           |               |             |  |  |  |  |
| 22. Have you ever had an animal that i  | equired a major surg  | ery for an injury or illr | ness? □YES    | □NO         |  |  |  |  |
| If yes, please explain:  PLANNING A PROSPECTIVE ADOPTION OR FOSTER CARE EXPERIENCE (please answer all)        |   |                           |               |             |  |  |  |  |
| 23. When you go on vacation, who will care for this dog?  |   |                           |               |             |  |  |  |  |
| 24. What kind of dog food will you feed this dog?   |   |                           |               |             |  |  |  |  |
| •   |   |                           |               |             |  |  |  |  |
| 25. Do you have a regular Veterinarian? □YES □NO Name:  |   |                           |               |             |  |  |  |  |
| 26. Who will groom and bathe this dog?27. What will you use for flea control?                                 |   |                           |               |             |  |  |  |  |
| 29. Would this dog wear a coller? TVES. TNO. TSematimes WHEN?   |   |                           |               |             |  |  |  |  |
| 28. Would this dog wear a collar? □YES □NO □Sometimes-WHEN?   |   |                           |               |             |  |  |  |  |
| 29. Would your dog walk off leash? □YES □NO □Sometimes-WHEN?  |   |                           |               |             |  |  |  |  |
| 30. What would happen to this dog if you had to move?   |   |                           |               |             |  |  |  |  |
| 32. Where will this dog spend its days?   | De leit alone each da<br>≀⊟heide ⊟Outeide   | y:<br>Evolain:            |               |             |  |  |  |  |
| 33. Where will this dog sleep?  |   |                           |               |             |  |  |  |  |
| 0.4 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\  |   |                           |               |             |  |  |  |  |
| 35. If you have children, please describ  | 34. Who will be ultimately responsible for this dog?  |                           |               |             |  |  |  |  |
| 33. II you have children, please describ  | e trieli previous expe  | enence with dogs          |               |             |  |  |  |  |
| 36. How will this dog get exercise?   |   |                           |               |             |  |  |  |  |
| 37. How will you discipline this dog?   |   |                           |               |             |  |  |  |  |
| 38. Will you plan to obedience train the  | dog? □YES □NO   |                           |               |             |  |  |  |  |
| □Obedience class □ 1-to-1 Train   |   | □Seek help if probler     | n arises □Oth | ner         |  |  |  |  |
| FOSTER AND ADOPTED DOGS - W   | •   | • •                       |               |             |  |  |  |  |
| 39. WHAT WOULD CAUSE YOU TO I   | REACH YOUR LIMIT  | OR WANT TO RETU           | JRN THIS DO   | G?          |  |  |  |  |
| CHEC  | CK ALL THAT APPL  | Υ                         |               |             |  |  |  |  |
| □Hair on your furniture/Shedding  | □Stains on rugs   | □Animal on the bed        | l □lllness    | □Humping    |  |  |  |  |
| □Aggression towards other dogs  | □Barkiness  | □Shy with people          |               | □Escaping   |  |  |  |  |
| ☐Other pets don't like the dog  | ☐Jumping up   | □Poor watchdog            | □Worms        | □Digging    |  |  |  |  |
| ☐Housetraining challenges   | ☐Growling at guest:   | s □Needs grooming         | □Chewing      | □ Vet bills |  |  |  |  |
| □Not a good dog park dog  | ☐Shy with dogs  | □Food allergies           | □Fleas        | □Ticks      |  |  |  |  |
| ☐Aggressive on leash  | □Carsickness  | □Allergies                | □Marriage     | □Divorce    |  |  |  |  |
| □Doggie destruction OF WHAT   |   |                           |               | □New Child  |  |  |  |  |
| □Spouse/partner does not like dog □My financial problems □None of these LISTED THINGS                         |   |                           |               |             |  |  |  |  |
| OTHER_  |   |                           |               |             |  |  |  |  |
| □NOTHING. I will FOSTER the do  |   |                           |               |             |  |  |  |  |
|   | □NOTHING If ADOPTED I will keep the dog until s/he is no longer alive, or I am, whichever comes first |                           |               |             |  |  |  |  |
| 40. How did you find out about <b>Rocket Dog Rescue</b> ? (Check all that apply)□Website □Facebook□Craigslist |   |                           |               |             |  |  |  |  |
| □Instagram □Twitter □Event  |   | □Friend: Who?             |               |             |  |  |  |  |
| ☐Other Please Describe  |   |                           |               |             |  |  |  |  |
| PLANNING FOR INVESTMENTS OF   | MONEY AND TIME (  | please answer all th      | at apply)     |             |  |  |  |  |
| FOR FOSTER ONLY: Basic supplies (leash, crate, food) are provided as needed                                   |   |                           |               |             |  |  |  |  |
| 41. Are you able to provide proper grooming, diet, shelter and exercise for the Foster Rocket Dog?            |   |                           |               |             |  |  |  |  |
| □YES □NO □LIMITS  |   |                           |               |             |  |  |  |  |
| 42.If a behavioral challenge arises will you seek help from a trainer we recommend? □YES □NO                  |   |                           |               |             |  |  |  |  |
| 43.Are you able to attend 2 adoption events a month with the Rocket Dog?                                      |   |                           |               |             |  |  |  |  |
| □Stonestown □Belmont □Alameda□ Livermore □Other   |   |                           |               |             |  |  |  |  |

| <b>FOR ADOPTION:</b> Dogs require investment of time and money.   |
|---|
| 44. Can you afford to provide medical care, proper grooming, diet, shelter and exercise for the dog? □YES □NO □LIMITS:  |
| 45. Are you able to make a long-term commitment to care for this dog? □YES □NO □LIMITS:   |
| 46. Will you consult and pay for a trainer we recommend if challenges develop? □YES □NO PLEASE CHECK ALL THAT APPLY. YOU ARE WELCOME TO ASK QUESTIONS!  |
| ☐ I understand that <b>Rocket Dog Rescue</b> is an all-volunteer non-profit California 501c3 charitable   |
| organization.  □ I understand that <b>Rocket Dog Rescue</b> provides for the medical needs, spaying or neutering, routine vaccinations and microchip identification systems for all Rocket Dogs and that these are required components before a Rocket Dog can be adopted.  □ I understand that a minimum <b>ADOPTION DONATION</b> of \$280 is necessary to help offset costs incurred to rescue and care for each Rocket Dog.  □ I understand that any IMMEDIATE POST-ADOPTION costs, medical or otherwise, must be borne by |
| the adopters.   |
| <ul> <li>□ I agree to donate an amount that represents my ability to support the rescue work necessary for this and every other dog to be rescued by ROCKET DOG RESCUE. Because most animals cost more than the minimal donation to care for, Rocket Dog Rescue welcomes you to make a larger donation if you are able.</li> </ul>  |
| ☐ Yes I agree to donate an amount of ☐\$280 ☐ More than \$280 : ☐Other:   |
| □ No, I cannot make any donation at this time, because  |
| ☐ My company has a matching gifts program, and I would like to match my donation.   |
| ☐ I would like to find out more about donating on an ongoing basis.   |
| ☐ FOR FOSTER HOME I understand that food, leashes, collars, crates, etc, are necessary to care of dogs while in foster care. Rocket Dog Rescue will provide these as needed and I will return them once the Rocket Dog in longer in my Foster Care.   |
| NOW COMES THE FUN PART! Please describe your dream dog.   |
| Please include any preferences regarding gender, personality type, energy level, fur, age, expectations of dog behavior, and anything else you think will help us match you with your dream dog.  |
|   |
| Thank you for your interest in Rocket Dog Rescue  Learn more at our website http://www.rocketdogrescue.org!   |
| Questions? Email us at ADOPT@rocketdogrescue.org or FOSTER@rocketdogrescue.org  |
| FOR ROCKET DOG RESCUE USE Review date   |
| Reviewed by (print name)  |
| OUTCOME / COMMENTS / RECOMMENDATIONS:   |
|   |