



Personal Information:

Name: _____

Home Phone: _____ Cell #: _____

Email: _____

Spouse's Name (if applicable): _____

How many children in your home? _____ Ages _____

Are there any others residing in your home?

Please List: _____

Employer Name: _____ Phone: _____

Employer Address: _____

City: _____ State: _____ Zip: _____

How long have you been there? _____

Residential Information:

Home Address: _____

City: _____ State: _____ Zip: _____

Is this where the pet will live with you? _____

How long have you resided at this address? _____

If less than two years, what was your previous address: _____

Do you Rent or Own _____ Apartment _____ House _____

Condo _____ Mobile Home _____

What happens to the pet if you move? _____

If renting, what is your Landlord's name? _____

Landlord's Phone Number: _____

Have you received permission from your landlord? _____

Other Adoption Information:

What rescue(s) are you interested in adopting? _____

What do you think makes this particular pet a good choice for you? _____

Have you had experience with this particular breed? _____

Who will be the primary care giver to this animal? _____

Do you have a fence around your yard? Please describe: _____

Do you have a pool and if so is it fenced? _____

How will you exercise your pet? _____

How many hours are you away from home during the average workday? ____

Where will your pet be kept during that time? _____

Where will your pet be sleeping during the night? _____

Are you familiar with crate training? _____

What training method/discipline method do you use? _____

What behaviors do you think are unacceptable? _____

What kind of other pets do you have in the home and what are their personalities (ie dominant, passive, shy...)? _____

Are they all current on their vaccinations? _____

Are they ALL sterilized? _____

Your Veterinarian's Name: _____

City: _____ Phone Number: _____

May we contact your vet to inquire of your past or presents pets? _____

Does anyone in the household have allergies? _____

Does anyone in the household have Asthma? _____

Have you or anyone in your household ever been convicted of animal cruelty, neglect, or abandonment? _____

Have you ever had to give up a pet? Please explain: _____

What circumstances do you feel are appropriate to return an animal?

Are there any other comments you would like to make? _____

PLEASE COMPLETE AND EMAIL TO: cpblfosters@gmail.com

I, (name)_____ certify that all information provided on this form is true. I give permission to Rescuer to verify information as needed. I understand that a home check will be mandatory prior to adopting a pet. Deposits given will be NON refundable. Any false statement will terminate potential adoption.

Signature: _____ Date: _____