



Project POOCH, Inc.®
 Community Outreach Office
 PO Box 305
 Lake Oswego, OR 97034-0035
 Office: (503) 697-0623
 Fax: (503) 636-5908
 Email: adopt@pooch.org

Date: _____

Dog of Interest: _____

Applicant Last Name: _____

Office Use Only

Deposit Received: Check #: _____ Cash: _____ Date Received: _____
 PayPal: _____ Date Received: _____

Reviewed & Approved:

___ **Yes**, on the following condition: _____

___ **No**, Why? _____

Home Visit: ___ **YES** ___ **NO** Date: _____

CGC Test: Passed: ___ **YES** Date: _____
 ___ **NO** Date set for testing: _____

APPLICATION TO QUALIFY FOR DOG ADOPTION

Pet parenthood is a serious responsibility. Each person or family who adopts a pet must understand and accept the responsibility and commitment that pet parenthood requires.

This application form is designed to help Project POOCH, Inc., make the best possible placement of a dog into your home. The adoption process may take some time since Project POOCH, Inc., is committed to doing everything possible to match the right dog with your circumstances. It is hoped that you will be provided all the information and support necessary for a successful adoption. Each dog at Project POOCH, Inc., looks forward to a lifelong home.

In order to assist in the adoption process, please complete the following application carefully and thoroughly. If you have any questions, do not hesitate to call the above telephone number.

PLEASE PRINT OR TYPE

1. Applicant's Personal Information

a. Name(s): _____

b. Phone: Hm: _____ Wk: _____ Cell: _____

c. Street Address: _____

City/St/Zip: _____

d. E-Mail address: _____

e. I/we Rent Own Residence type: *(check one below)*

Apartment House Condo Duplex Mobile Home Houseboat Other: _____

f. How long have you lived at your current address? _____ Yrs. _____ Months

g. If you do not have a yard, how do you plan to make sure the dog gets exercise and potty breaks? _____

h. Landlord's Name: _____

Phone No. _____

i. Do you plan on moving soon? _____

j. Number of adults in household: _____ Children: _____ Children's Ages: _____

k. How did you hear about Project POOCH? _____

l. Please tell us about your lifestyle and activities, examples: (do you hike, run, enjoy the outdoors, etc.) _____

m. Please tell us about your work schedule, example: (how many hours per day are you gone and how many days per week?) _____

n. Will there be someone at home when you are not? _____

2. Qualities Applicant Seeks in a Dog

a. Why do you wish to adopt a dog? *(check all that apply)*

- Pet/Friend Hunting Guard/Protection/Watch Dog
 Companion for Other Pet Other reasons: _____

b. What type of dog do you wish to adopt? *(check all that apply)*

- Calm Active Male Female Adult Puppy
(age 6 mos.- 1 year)

- Gets along with Cats Gets along with Dogs Okay with small children

Type of hair/coat: _____ Weight Range: _____

Breed or general type: _____

Personality: _____

c. Why do you wish to adopt a dog from Project POOCH?

3. Other Household Pets

a. List the pets you currently own below. Are they current on vaccinations? _____

If no, please explain: _____

| Dog | Cat | Other | Sex | Spayed/ Neutered | Age | Kept in or Outside |
|-----|-----|-------|---|--|-----|--|
| 1. | | | <input type="checkbox"/> M <input type="checkbox"/> F | <input type="checkbox"/> Yes <input type="checkbox"/> No | | <input type="checkbox"/> In <input type="checkbox"/> Out |
| 2. | | | <input type="checkbox"/> M <input type="checkbox"/> F | <input type="checkbox"/> Yes <input type="checkbox"/> No | | <input type="checkbox"/> In <input type="checkbox"/> Out |
| 3. | | | <input type="checkbox"/> M <input type="checkbox"/> F | <input type="checkbox"/> Yes <input type="checkbox"/> No | | <input type="checkbox"/> In <input type="checkbox"/> Out |
| 4. | | | <input type="checkbox"/> M <input type="checkbox"/> F | <input type="checkbox"/> Yes <input type="checkbox"/> No | | <input type="checkbox"/> In <input type="checkbox"/> Out |

b. Veterinarian's Name: _____

Phone Number: _____

- c. Please list all the past pet(s) you have had in the last ten years and why you no longer have them (i.e. died of old age, euthanized, gave away, hit by a car, etc.) Attach an extra page, if necessary.

| Type of Pet & Breed (Dog, Cat, etc.) | Why You No Longer Have It |
|---|---------------------------|
| 1. | 1. |
| 2. | 2. |
| 3. | 3. |
| 4. | 4. |

4. Pet Care and Facilities

- a. Do you have a fenced yard? ___ What type of fence? _____ Height: _____
- b. Will this pet be an: Indoor pet? ___ Outdoor? ___ Both? ___ Unsure? _____
- c. Where will this dog be when you are home? _____

- d. Where will this dog stay when you are away? _____

- e. Where will this dog stay when you are sleeping? _____

5. Training and Behavior

[Please note: Any dog can be unpredictable. All dogs respond differently to people. All dogs placed for adoption by Project POOCH, Inc., often have unknown histories which training may not overcome.]

[Please note: Young children must always be supervised while in the presence of a dog]

- a. Would you be willing to spend time with the handler/trainer to learn about the dog? _____
- b. Would you be willing to continue training this dog? _____
If so, what type of training are you interested in pursuing? _____

6. **Is there anything else you feel necessary to share with us?** _____

7. **Application Certification**

This certifies that the information contained in this application is true and complete. Through my signature below, I confirm that I agree to cooperate in the adoption process by providing medical care, training, and pet related amenities as recommended by Project POOCH, Inc. Further, in the event that Project POOCH, Inc., places a dog in my household, I agree that before I sell or give up the dog, I will give Project POOCH, Inc., 15 days' written notice at the above address to exercise its right of first refusal.

Applicant's Signature: _____ **Date:** _____

8. **Home Visit Process**

When there are multiple applications for the same dog, Project POOCH will choose a few finalists for home visits. **Finalists are not selected based on the order in which the applications are received.** Our goal is to find each of our dogs the home that is best for them, so we carefully select finalists based on each dog's specific needs, interests, and quirks. We make our decisions carefully by consulting the trainers and kennel managers who work closely with the dogs on a daily basis.

The \$50 home visit fee is only refundable if a home visit is **not** conducted. If a home visit is conducted but you are not selected as the adopter, the fee is non-refundable; however, it can be used to cover the cost of another home visit if you are interested in adopting a different POOCH dog.

I understand and will cooperate with the home visit process.

Applicant's Signature: _____ **Date:** _____

Please return the completed application to:

Project POOCH, Inc.
Community Outreach Office
PO Box 305
Lake Oswego, OR 97034
Fax: 503-636-5908
Email: adopt@pooch.org

Your application will be reviewed by Project POOCH, Inc. *If your application is accepted, the adoption is **conditional** upon payment of the adoption fee (the fee may change without notice; please – confirm the adoption fee at the time of acceptance). **A \$50 deposit is required which applies to the adoption fee. If the dog is not adopted, the deposit will be returned unless a home visit has already been done.***
