



ALMOST HOME ANIMAL RESCUE

P.O. BOX 5302

Maryville, TN 37802

865-977-0751

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APPLICATION FOR ADOPTION

Name of animal _____ Name of applicant _____

Address _____ City/State _____ Zip _____

Home Phone _____ Work Phone _____ E-Mail _____

LIVING SITUATION

Where do you live? House Farm Townhouse/Duplex Apartment Mobile Home

Do you own or rent? Own Rent

If you rent, has your landlord given you permission to have a pet? Yes No

Landlord's name _____ Landlord's telephone number _____

What will happen to the pet if you move? _____

How long have you lived at this address? _____

Do you have a fenced yard? Yes No

If yes, what type of fence? _____ How high? _____

If you have roommates, do they agree to have pets in the home? Yes No

How many people live at this address? Adults _____ Children _____ Ages of Children _____

PETS

Please list all the pets you have owned in the last five years: _____

Are all these animals still with you? Yes No

If no, please explain the circumstances _____

Who is your veterinarian? _____ How long have you been a client? _____

Veterinarian's address _____ Telephone number _____

Under what name, if different, are your records listed? _____

Are/were all your pets spayed or neutered? Yes No

If no, please explain. _____

Do any of your current pets have health and/or temperament issues? Yes No

If yes, please explain. _____

SAFETY & SHELTER

Where will the animal live? Indoors Outdoors Both

Where will the animal sleep? _____

How long will the animal be left alone during the day? _____

If adopting a dog, how much time per day will you allow for exercise? _____

How long will the animal be crated, if at all, during the day? _____ Night? _____

BEHAVIOR ISSUES

Do you know how to house-train an animal? Yes No

If adopting a dog, would you consider obedience training if it is necessary? Yes No

If adopting a cat, are you considering de-clawing? Yes No

If a behavioral problem should arise (i.e. chewing, barking, scratching), how would you address it? _____

If a behavioral problem seems irresolvable, do you agree to contact Almost Home to learn how to address the problem? Yes No

Please list two personal references:

Name _____ Telephone number _____

Name _____ Telephone number _____

Prospective Adopter's Signature

Date

FOR AHAR USE ONLY

Initial AHAR representative _____

Follow-up AHAR representative _____