

# DOG ADOPTION QUESTIONNAIRE



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DATE

I AM OVER 18 YEARS OLD

YES

NO

I'M INTERESTED IN ADOPTING ... Please list the name or names of the dog(s) you are interested in or the characteristics you are looking for in a dog.

## DOG PREFERENCES & EXPERIENCE *Please circle your answer.*

I have owned a dog before...	YES	NO	Currently own dog(s)		
The last time I had a dog was...	2-10 years	10+ years	Not currently, but within the last year		
My dog needs to get along with other dogs.	YES	NO	Don't know		
I want a guard dog.	YES	NO			
I want my dog to hunt or herd with me.	YES	NO			
My dog will primarily be...	Inside Dog	Outside Dog			
My dog needs to be able to be alone (per day)...	2 hours or less	4 hours or less	8-10 hours	12 or more hours	
When I'm home, I want my dog to be by my side...	All of the time	Some of the time	Little of the time		
My dog needs to be good with: <i>(circle all that apply)</i>	Children over 8 years	Children under 8 years	Seniors	Cats	Animals other than dogs and cats
I want my dog to be the type that is very enthusiastic in the way she shows affection for people...	Not at all	Somewhat	Very		
I want my dog to be playful...	Not at all	Somewhat	Very		
I want my dog to be laidback...	Not at all	Somewhat	Very		
I am comfortable doing training with my dog to improve manners.	No training	Some training	A lot of training		
I (or my children) want to participate in Agility, Flyball, or Obedience with our dog.	YES	NO	MAYBE		
I am interested in a dog with "special needs" (medical or behavioral).	YES	NO	MAYBE		

How many hours will your dog spend OUTSIDE per day?

It's MOST important to me that my dog...

COMMENTS:

HOW DID YOU HEAR ABOUT OUR ADOPTION PROGRAM?

PETSMART

PREVIOUS ADOPTER

FRIEND

WEBSITE

FAMILY

ADOPTION BOOTH

TALLAHASSEE DEMOCRAT

SEARCH ENGINE

PETFINDER

OTHER

\_\_\_\_\_

## CONTACT INFO Please provide a LOCAL address.

NAME	
PRIMARY PHONE	
ALTERNATE PHONE	
EMAIL	
STREET	
CITY	
STATE	ZIP

## ADOPTING A NEW PET

ARE YOU WILLING TO COMMIT TO KEEPING YOUR NEW PET FOR 10-15 YEARS? <i>(This is the average life span.)</i>	<input type="checkbox"/> YES <input type="checkbox"/> NO
MAY WE VISIT YOUR HOME IN THE FUTURE TO VERIFY THE PET'S WELL BEING?	<input type="checkbox"/> YES <input type="checkbox"/> NO
DO YOU AGREE TO CONTACT THE FOSTER PARENT OR LCHS IF YOU ARE UNABLE TO KEEP YOUR NEW PET FOR ANY REASON?	<input type="checkbox"/> YES <input type="checkbox"/> NO

*The Leon County Humane Society is a non-profit 501(c) 3, tax deductible organization. A copy of the official registration and financial information may be obtained from the Division of Consumer Services by calling toll free 1-800-435-7352 within the state. Registration does not imply endorsement, approval, or recommendation by the state. The Leon County Humane Society's registration number is SC-10102.*

## YOUR HOUSEHOLD

I <input type="checkbox"/> RENT <input type="checkbox"/> OWN MY HOME, WHICH IS A <input type="checkbox"/> HOUSE <input type="checkbox"/> APT <input type="checkbox"/> MOBILE HOME <input type="checkbox"/> TOWN HOUSE	
LANDLORD NAME	LANDLORD PHONE

## YOUR PETS

HOW MANY PETS HAVE YOU OWNED OVER THE LAST 5 YEARS? <i>(INCLUDE CURRENT PETS.)</i>				
PLEASE TELL US ABOUT YOUR MOST RECENT PETS. <i>Please circle.</i>				
NAME	SPECIES	BREED	SEX	ALTERED
	CAT DOG OTHER:		M F	YES NO
	CAT DOG OTHER:		M F	YES NO
	CAT DOG OTHER:		M F	YES NO
	CAT DOG OTHER:		M F	YES NO
	CAT DOG OTHER:		M F	YES NO
WHAT HAPPENED TO THE PETS YOU NO LONGER OWN?				
WHO IS YOUR VETERINARIAN?		VET'S PHONE		
MAY WE CONTACT YOUR VET FOR A REFERRAL			<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF YOU HAVE A DOG OR CAT, WHAT HEARTWORM PREVENTATIVE DO YOU USE?				

I VERIFY THE INFORMATION ABOVE IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_