

OFFICE USE ONLY:

Received By:

Dogs Name:

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Comments:

Dog Adoption Questionnaire

By completing this questionnaire, you will aid AWLNSW in determining if you and your family are ready for pet adoption, and if the dog you are interested in would suit you and your lifestyle.

This form does not confirm/guarantee an adoption of an animal from AWLNSW.

Personal Information

Name:

Age: Under 20 ☐ 20-35 ☐ 35-50 ☐ 50+ ☐

Home Address: _____

Home Phone:

Work Phone:

Mobile Phone:

Email:

Your Occupation: _____ Partner's Occupation: _____

Your Work Hours: _____ Partner's Hours: _____

Names, age and relationship to you of any other people living in the household:

1.

2.

3.

4.

5.

Has any one in your family experienced animal allergies? Yes ☐ No ☐

Please provide details: _____

Your Home

1. Type of home house/apartment/townhouse:

And do you: Own ☐ Rent ☐

NOTE: If rental do you have permission to keep pets?

(Please attach letter from real-estate lease, rates notice to this application.

Applications will not be accepted/approved without relevant paper work)

2. Yard Size (if applicable):

If you have a yard is it: Fenced ☐ height of fence: _____ Unfenced ☐

3. Does your home have a pool/dam? Yes ☐ No ☐

If you have one, describe any fencing fitted: _____

How would you introduce a dog to your pool/dam? _____

What is your main reason for adopting a dog? (Please provide details): _____

Who in the home would be responsible for the care of the dog? _____

4. Who is the dog primarily for?

You ☐ Spouse ☐ Children ☐ Existing pet ☐

Other(Please provide details) _____

5. Do you travel ? Yes ☐ No ☐

How often? _____

Domestic or international:

For how long at a time are you away on holidays? _____

6. When you travel where will you leave the dog? _____

7. Are you aware AWL NSW offers pet boarding? _____

Your Companion Animals

Do you **presently** have a dog? Yes ☐ No ☐

Have you **previously** owned a dog? Yes ☐ No ☐

Current Dogs

Breed	Age	Sex	Desexed	When, How & Why obtained	Kept inside or out

Previous Dogs

Breed	Age	Sex	Desexed	When, How & Why obtained, what happen to dog.	Kept inside/out

Any Other Current Pets you Have

Species	Age	Sex	Kept where	Obtained in what year

Have you ever trained a dog at a group class? Yes ☐ No ☐

Please provide details name/organisation: _____

Have you ever hired a dog trainer for one-on-one lessons? Yes ☐ No ☐

Please provide details name/organisation: _____

Have you been involved in the following dog sports?

Agility ☐ Tracking ☐ Obedience ☐ Flyball ☐ Herding ☐ Other ☐ _____

Your New Dog

Housing:

1. When you are at home, will the dog would be:

Indoors ☐ Outdoors ☐ Both ☐

2. Where would the dog be left while you are out of the house?

Indoors ☐ Outdoors ☐ Both ☐

3. How many hours per day would the dog be left alone? _____

4. Where would the dog sleep?

Inside ☐ Outside ☐

5. Where abouts indoors/outdoors? _____

6. If the dog will be outside, is your yard secure with latched gates?

Please provide details of gates: _____

7. Are there rooms or areas of the home/yard that will be off-limits to the dog?

Please provide details: _____

8. Do you allow dogs on furniture?

Yes ☐ No ☐

Some ☐ Please provide details: _____

Behaviour: Please provide detailed answers to the following questions.

1. How do you plan to handle the dog's exercise needs? _____

2. How do you plan to handle the dog's mental stimulation requirements? : _____

3. Do you feel obedience training makes a dog a better companion? Yes ☐ No ☐

Why? : _____

4. If necessary, would you be willing to enlist the help of a dog trainer/behaviourist at your own expense if behaviour issues arose? Yes ☐ No ☐

Please provide details name or trainer or organisation: _____

5. If the dog becomes destructive in the home/yard what would you do to rectify the situation/issue? _____

6. If the dog has toileting accidents in the home what would you do what would you do to rectify the situation/issue? _____

7. If the dog become aggressive to people and/or dogs what would you do? _____

Rehoming:

1. Under what circumstances would you **not** keep the dog (you may select more than one if applicable)?

☐ Divorce ☐ Illness in family ☐ Moving ☐ New baby ☐ New job

☐ Housetraining problem ☐ Chewing ☐ Barking ☐ Digging ☐ Allergy

☐ Shedding too much ☐ Dog grows too big ☐ Dog becomes ill ☐ Kids ignore the dog

☐ Pets didn't get along ☐ Not obedient enough

☐ Other? (Please provide details)

OR

I would not give up the dog for any of those reasons ☐

2. What would you do with the dog if you had to move away (Please provide details):

Locally? _____

Out of State? _____

Overseas? _____

To a place where pets are not allowed? _____

Financials:

1. If the dog becomes ill or injured, are you financially prepared to provide medical care?

Yes ☐ No ☐

If Yes, is there a maximum amount you would spend? _____

2. As a dog can live 15+ years, what would you do if you could no longer care for the dog? _____

3. If you have one, who is your family Veterinarian please provide details
name/organisation:

Name: _____

Phone Number: _____

4. Is there anything else you would like to tell AWL NSW about yourself and your situation which may be necessary information we might need to know?

All of the above information I have provided in this questionnaire is true and correct.

Full Name:

Signature:

Date: