

APPLICATION FOR ADOPTION

To ensure the best possible placement of our rescued dogs, and in order to determine that the proposed adoption is in the best interest of both the dog and you and your family, please complete each of the following. Be thorough and please print legibly as incomplete applications will not be considered.

Return completed application to: applications@dobermanrescueco.org

Or

Doberman Rescue of Colorado

P.O. box 11140

Englewood, CO 80151

Voice: 303 761-7012 Fax: 303 781-5705

Note: E-mail or online applications are preferred and processed more quickly

Name(s) _____ Date: _____

Address: _____ City & State _____

Home Phone: _____ Work Phone: _____

Occupation: _____ Name of Employer: _____

Spouse's Occupation: _____ Name of Employer: _____

E-mail Address _____

Please list all pets that you currently own including sex and age.

Are they spayed or neutered? If not, why not?

Please list all pets that you have had in the last seven years. If you do not still have the pet, please tell us why.

Why do you want a Doberman pinscher? Be specific.

How have you educated yourself about this breed?

Please state your preference regarding the sex, age, and personality/behavior traits you would prefer.

Would you consider something other than the stated preferences?

Would you consider a mix?

Would you be interested in being a foster home for Doberman Rescue?

List the names and ages of members of your household.

If you do not own your home, do you have your landlord's permission to keep dogs? Can you provide documentation in writing?

How long have you lived at your current address?

Where will you keep your dog during the day, at night and during family absences overnight?

Do you have a fenced yard? If so, how large is the area, what kind of fencing, and how high?

How will you exercise your dog, confine, and provide for its need to eliminate?

What is the maximum and average number of hours that the dog will be left alone in a 24 hour period?

Do you object to the discriminate use of a crate? If so, why?

Do you have a crate? If not, would you get one?

What will you do if your dog is destructive when left alone?

Have you ever trained a dog before?

If yes please specify:

Have you ever surrendered a pet of yours to an animal shelter? Have you ever sold or given away one of your pets? If so, Why?

Can you afford to spend at least \$600 per year for food and routine medical care for your pet?

What do you plan to feed your dog? Please be specific.

What are the requirements for dog ownership in your community including vaccinations, registration, and number of pets?

Do you live in a covenant controlled community or belong to a homeowners association?

What circumstances, in your mind, would justify getting rid of a dog?

Has anyone in your household ever been convicted of or charged with offenses relating to cruelty to animals or child abuse?

Is there any such charge pending? If yes, please explain and give the disposition of charge. Use an additional sheet if necessary.

Please provide the name, address, and phone number of your regular veterinarian.

Please provide the name, address and phone number of your nearest living relative.

Please provide the names, addresses, and phone numbers of two non-related individuals who can serve as references.

1)

2)

May we visit your home and check your references to verify the information you have provided?

Thank you for taking the time to complete this application. By signing below, you attest to the truthfulness of your answers. Falsification of any of the above information will be grounds to disallow your adoption of a rescued dog.

Applicant

Signature _____

Applicant

Signature _____

(Electronic signatures are acceptable)

(If there are two responsible adults in the household, both must sign application)

This section for use of group representative

Approved____ Disapproved____ Withdrawn____ Other____ Rescue Representative_____

Comments: