Date: ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CAT ADOPTION APPLICATION

**ADOPTERS MUST BE 18 YEARS AND OLDER**

 Cat’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cat’s ID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FILL OUT THE FOLLOWING APPLICATION IN ITS ENTIRETY WE DO NOT GIVE REFUNDS ON ADOPTION FEES**

First and Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt/Lot #: \_\_\_\_\_\_\_\_\_\_\_\_ County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address (Please write clearly): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place Of Employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s License/State ID number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Housing ownership: ⬜ Own ⬜ Rent ⬜ Rent to Own ⬜ Live with Parents

Housing type: ⬜ Single Family Home ⬜ Apartment ⬜ Townhome ⬜ Dorm

 ⬜ Farm ⬜ Mobile Home ⬜ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­­­

**Landlord’s Name and Phone Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you lived at this current address? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you in the process of moving, or anticipate moving in the next few months? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you ever move, have you considered that another place may not allow pets? What will you do if this happens? \_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADOPTION INFORMATION**

What is your past and/or current experience with cats?

⬜ 1st time owner ⬜ Have had 1 or more cats as an adult ⬜ Had a cat as a child

Do you have experience in resolving behavior issues? \_\_\_\_\_\_\_\_ (Explain:) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you adopted with SVASC before? ⬜ Yes ⬜ No If yes, where is pet now? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are there any reasons you would relinquish this kitten/cat back to SVASC? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**PREVIOUS AND CURRENT PET INFORMATION**

Are you prepared for veterinary expenses? (Preventative care, medical issues that may arise, etc) ⬜ Yes ⬜ No

Who is your veterinarian? Name/Clinic \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What name would veterinary records be under? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have other veterinarians that may have records for your current or past pets? ⬜ Yes ⬜ No

If so, please provide their name and contact information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever surrendered any pet to a private rescue/shelter or individual? ⬜ Yes ⬜ No

If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever had a pet: ⬜ Run away ⬜ Get hit by a car ⬜ Kept as an outdoor pet

 ⬜ Die tragically (i.e. not of natural causes) ⬜ Other, not listed ⬜ No

**Current Pets:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Animal Type**Dog/Cat/Other | **Breed / Name** | **Age** | **Gender**M/F | **Altered**Spayed / NeuteredYes/No | **How long have you owned this animal?** | **Kept**Inside/Outside/Both? | **Up-to-date on vaccines?** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

If you have a dog, has s/he been around cats/kittens?

⬜ No, neither ⬜ Yes, adult cat(s) only ⬜ Yes, both kittens and adult cats ⬜ Yes, kitten(s) only

Please explain your dogs’ behavior with kittens/cats: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Previous Pets (In the last 5 years):**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Animal Type**Dog/Cat/Other | **Breed / Name** | **Age** | **Gender**M/F | **Altered**Spayed / NeuteredYes/No | **How long did you own this animal?** | **What happened to this animal?** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
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**HOUSEHOLD INFORMATION**

Please describe your household: ⬜ Active ⬜ Noisy ⬜ Quiet ⬜ Average ⬜ Busy ⬜ Other? \_\_\_\_\_\_\_\_\_

**Please list the names and ages of ALL people living in the home and their relationship to you (spouse, partner, roommate, daughter)**  *Failure to fully disclose this information will result in immediate adoption denial.*

Name and age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do children (other than immediate family) ever visit your home? ⬜ Yes ⬜ No

If so, how often? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age(s) of the children? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does anyone in the household have allergies to any kind of animals?

 ⬜ Yes, doesn’t take medication ⬜ Yes, but takes medication ⬜ No known allergies

Has anyone in your household ever been convicted of animal cruelty, neglect, or abandonment? ⬜ Yes ⬜ No

**REFERENCES**

**Please provide 3 references that we can contact:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NEW PET INFORMATION**

***Please understand that it may take a new cat 2 weeks or more to***

***adjust to a new home and/or to other pets and visitors.***

Where will you keep this cat? (*Check ALL that apply*)

⬜ Free run of house ⬜ Indoor only ⬜ Indoor/outdoor ⬜ Outdoor/barn ⬜ Garage/basement

⬜ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Why are you choosing to adopt a cat? (*Check ALL that apply*)

⬜ Mouser/barn cat ⬜ Companionship for other pet ⬜ Companionship for myself/children

 ⬜ Gift for a friend/relative ⬜ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever had a cat declawed? ⬜ Yes ⬜ No

What are your thoughts on declawing? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you plan on declawing this cat? ⬜ Yes ⬜ No

 If yes, why? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**It is unrealistic to expect a child of any age to assume complete responsibility for an animal. Ultimately the adult(s) of the household are responsible for the complete care of the animals in the home. Are you prepared to take all responsibility for this animal should your child/ren become disinterested?** Yes\_\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_\_

**Please give careful consideration to adopting this animal. Animals are not toys or a short term commitment, they do require daily attention. Make sure your lifestyle allows time, emotional commitment and financial responsibility this animal will need over its life span.**

**It is the responsibility of the SVASC to place this animal in an environment compatible with its needs and to ensure the adoption is in the best interest of both the animal and applicant. SVASC reserves the right to deny any applicant.**

**\*\*SVASC may follow up by phone or in person on any adoption to ensure compliance with the adoption contract.\*\***

**I certify that I have read the above information and that all information I have given is true and accurate and is subject to verification by SVASC. I understand that any falsification may result in the nullification of an adoption.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Signature Printed Name Date**

**Driver’s License State and Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please be prepared to show ID.**

**FOR OFFICE USE ONLY**

Home ownership/landlord approval \_\_\_\_\_ Vet check\_\_\_\_\_ ID check\_\_\_\_\_ Read evaluation\_\_\_\_\_

**Areas of emphasis that were counseled for this pet:**

Indoor/outdoor\_\_\_ Vetting\_\_\_ Crating\_\_\_ Kid restriction\_\_\_ Animal restriction\_\_\_ Work schedule\_\_\_ Pet’s activity level/exercise needs\_\_\_ Medical conditions\_\_\_ OTHER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPROVED DENIED**