



DOG ADOPTION APPLICATION

Name of Dog(s) you are applying for: _____

Today's Date: _____

Adoption Application Agreement – PLEASE READ

The speed at which your application is processed for adoption is dependent largely on how thoroughly and specifically you answer each question. Please include all phone numbers and do not leave any applicable question blank. Please include a detailed explanation for any question where you are asked to elaborate an answer. Please print clearly, applications that cannot be read cannot be processed.

Failure to provide accurate, true, and/or complete information to the best of your knowledge will result in the immediate termination of your adoption process. No exceptions.

If you are married or currently living with a significant other, that person's information must be included where the application asks for Co-Applicant information. You must be at least 18 years of age to submit an adoption application (Applicant & Co-Applicant).

All adoption applications received by the adoption center are forwarded directly to the Pixie Project adoption committee. The adoption center does not review any applications nor is it responsible for any decisions made by the adoption committee. All applications may be followed with a home visit.

We are not first come first served. The Pixie Project focuses on finding good matches between dogs and families to ensure life long adoptions. The Pixie Project reserves the right to refuse adoption to anyone without disclosing the reasons.

By signing below, you are verifying that you have read and agree to all terms stated above.

I/we attest that the information provided on this application is true and accurate to the best of my/our knowledge. I/we understand that completion and submission of this application does not guarantee adoption of a dog.

Applicant's Signature: _____

Applicant's Printed Name: _____

Date: _____

Co-applicant's Signature: _____

Co-applicant's Printed Name: _____

Date: _____

Note: Submission by email will serve as signature agreement



YOU WISH TO ADOPT? (PET'S NAME) _____

WHERE DID YOU FIND/SEE THIS DOG? _____

HAS YOUR FAMILY MET THIS DOG YET? _____

Adoption Application – Dog

The Pixie Project

Adoption Center

PH: (503) 542-3433

FAX: (503) 542-3437

EMAIL: info@pixieproject.org

WEBSITE: www.pixieproject.org

Name: _____ Co-Applicant Name: _____

Relationship to Co-Applicant: _____

If the co-applicant listed is your significant other, how long together? _____

Street Address: _____ Mailing Address (if different): _____

City, State & zip code: _____ County: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Employer: _____ Occupation: _____ Work phone: _____

How long with this employer? _____

Co-Appl. Employer: _____ Co-Appl. Occupation: _____ Co-Appl. work phone: _____

How long with this employer? _____

Co-Appl. Cell Phone: _____ Co-Appl. Email Address: _____

Housing Information: The section below is in regards of your housing. Please include all individuals residing in the home. Understanding who will be interacting with the dog daily will help us ensure a good fit.

No. of adults in household? _____ Ages? _____ No. of children in household? _____ Ages? _____

Besides your immediate family are others residing in your home? (Extended family members, friends, roommates, tenants)

Are all family members/housemates available to meet the dog? _____

Who will be responsible for exercising, training and caring for the dog? _____

Does anyone in your family have allergies to dogs? NO ____ YES ____ If yes, describe: _____

Do you own or rent your home? _____ How long have you lived at your current address? _____

Are you in: HOUSE ____ APARTMENT ____ CONDO ____ Other: _____ Sq Ft: _____

If you rent, please provide your landlord's name & phone #: _____

Do you have the permission of your landlord to have a dog? _____

Do we have your permission to call your landlord to check on his or her approval? _____

Does your landlord have any breed or size restrictions? If yes, what are they? _____

Is a pet deposit required? YES ____ NO ____ Paid? YES ____ NO ____

Desired Traits and Lifestyle: The section below provides us with valuable information we use to help you find a dog ideally suited to your home.

Age desired: PUPPY (8-12 weeks) ____ YOUNG (13 weeks-2 years) ____

ADULT (3-8 years) ____ SENIOR (+9 years) ____

What breeds are you interested in? _____

Would you consider a special needs dog or one who requires medication? _____

Do you understand that we do our best to identify the correct mix or breed(s) but without knowledge of the parents there is no way to be sure and is this ok with you? YES ____ NO ____

Energy level preferred? _____ Higher _____ Calmer _____

Desired Sex? _____ Male _____ Female _____ Either _____

Size desired? _____ 5-30 lbs _____ Over 30 lbs _____

What activities are you most interested in doing with your dog (check any that apply)?

DAILY RUNNING ____ NEIGHBORHOOD WALKS ____ HANG OUT IN THE HOUSE ____

DOG PARKS ____ WEEKEND TRIP ____ OBEDIENCE TRAINING ____
(HIKING, BEACH, ETC)

What changes in your life are you anticipating in the next year? In the next five years? (For example, new baby, grandchildren, new job, moving, remodeling) _____

How long will the dog be left alone (without humans) on a typical: Weekday? _____

Weekend? _____

Please describe where the dog will stay when you are not home (while you are at work, running errands, etc):

Are you familiar with crate-training dogs? _____

Are you open to find out more about crate training and implementing it with a new dog? YES _____ NO _____

Please describe where the dog will sleep at night? _____

Do you have a yard? YES _____ NO _____ If yes, what size? _____ Is your yard fenced? YES _____ NO _____

If so, describe your fence (material, height, etc): _____

How long do you want to spend exercising your new dog on a daily basis (Select One)?

5-30 MINUTES _____ 30 MINUTES – 1 HOUR _____ OVER 1 HOUR _____

Will the dog receive formal obedience training? _____

What training methods have you used in the past with your dogs (please list trainer's name or name of obedience school if applicable)? _____

Are you willing to take the time to work with a dog on housebreaking issues should the need arise? _____

What would you do if your dog were to develop a problem with?

Digging: _____

Barking: _____

Chewing: _____

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

Do you understand and accept that changing a dog's environment may cause the dog to have accidents, especially in the early days of the adoption? _____

Have you ever sold, given away, or surrendered a pet to a shelter or otherwise? _____

If yes, please specify why the pet is no longer with you and where or to whom he/she went:

In case of emergency, who will care for your dog? _____

How will your dog be cared for when you are out of town or on vacation? _____

Pet History: The section below covers animals that are currently residing in the home as well as previous pet history. This ensures that any dog we match with you will be a great addition to your current animals!

Please list ALL of your CURRENT pets:

1. Species: DOG ___ CAT ___ Other: _____ Name: _____

Gender: MALE ___ FEMALE ___ Age: _____ Breed: _____

Spayed/Neutered? YES ___ NO ___ If no, please explain: _____

Where did you get this pet? _____ How long have you owned this pet? _____

2. Species: DOG ___ CAT ___ Other: _____ Name: _____

Gender: MALE ___ FEMALE ___ Age: _____ Breed: _____

Spayed/Neutered? YES ___ NO ___ If no, please explain: _____

Where did you get this pet? _____ How long have you owned this pet? _____

3. Species: DOG ___ CAT ___ Other: _____ Name: _____

Gender: MALE ___ FEMALE ___ Age: _____ Breed: _____

Spayed/Neutered? YES ___ NO ___ If no, please explain: _____

Where did you get this pet? _____ How long have you owned this pet? _____

How do you think any current pets will react to having a new dog in the home?

List ALL other pets you have had in the past 10 years:

1. Species: DOG ___ CAT ___ Other: _____ Name: _____

Gender: MALE ___ FEMALE ___ Age: _____ Breed: _____

Spayed/Neutered? YES ___ NO ___ If no, please explain: _____

Where did you get this pet? _____ How long did you own this pet? _____

What happened to this pet? If pet is deceased what was the date, age and cause of death? If not deceased where is the pet now? _____

2. Species: DOG ___ CAT ___ Other: _____ Name: _____

Gender: MALE ___ FEMALE ___ Age: _____ Breed: _____

Spayed/Neutered? YES ___ NO ___ If no, please explain: _____

Where did you get this pet? _____ How long did you own this pet? _____

What happened to this pet? If pet is deceased what was the date, age and cause of death? If not deceased where is the pet now? _____

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What happened to this pet? If pet is deceased what was the date, age and cause of death? If not deceased where is the pet now? _____

Vet Info:

Full name & phone number of your current veterinarian:

Name and phone number of ANY other veterinarians that you have used:

When was your current pet's last visit to the veterinarian and why?

What did we forget? Please give us any further information on your family or lifestyle you would like us to consider when matching you with a dog.
