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
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? _______________________________________________________________________


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.


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 (circle): 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? (Circle all that apply): 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? (Circle one): Male Female Either

Size desired? (Circle any): 5-30 lbs Over 30 lbs

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

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

**DOG PARKS** **WEEKEND TRIPS** **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 willing to find out more about crate training and possibly implementing it with a new dog? ______

Please describe where the dog will sleep at night? _________________________

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

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

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

  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? ________________________________
Do you have any upcoming trips that might interfere with bringing a new dog home?

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**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?

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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? ________________

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 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? ________________

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.
________________________________________________________________________