

DOG ADOPTER SURVEY
 DATE _____ LAST NAME _____ FIRST NAME _____ ZIP _____
 ADDRESS _____ STATE _____ CITY _____
 HOME PHONE _____ WORK PHONE _____ EMAIL _____

1	I have owned a dog before.	YES	NO				
2	The last time I had a dog was...	2—10 years ago	More than 10 years ago			Within the last year	
3	My dog needs to get along with my other dogs.	NO				YES ← List their names, ages, genders, and breeds	
4	My dog needs to be good with (circle all that apply)	Children over 8 years old	Children under 8 years old	Elderly people		Cats Animals other than dogs or cats	
5	My dog will primarily be an...	Inside dog				Outside dog	
6	How many hours will your dog spend outside per day?					_____ hours	
7	My dog needs to be able to be alone...	4 hours or less per day	8-10 hours per day	2 hours or less per day	12 hours per day		
8	When I'm at home, I want my dog to be by my side...		All of the time	Some of the time	Little of the time		
9	When I'm not at home, my dog will spend its time...	In the garage In a crate in the house	In the yard			Loose in the house Confined to one room in the house	
10	I want a guard dog.	NO				YES	
11	I want my dog to hunt or herd with me.	NO				YES	
12	I want my dog to be the type that is very enthusiastic in the way s/he shows s/he loves people:		Not at all	Somewhat	Very		
13	I want my dog to be playful:		Not at all	Somewhat	Very		
14	I want my dog to be laid back:		Very	Somewhat	Not at all		
15	I am comfortable doing some training with my dog to improve manners such as jumping, stealing food, and pulling on the leash:		No training	Some training	A lot of training		
16	I (or my children) want to compete in Agility, Flyball, or Obedience with our dog.		NO		YES		
17	I am interested in a dog with "special needs" (medical or behavioral).		NO		YES		
18	How much do you think you'll spend yearly for the care of your dog? (Food, medical care, boarding, toys, etc.)					\$ _____	
FOR OFFICE USE ONLY:		N:	M:	L:	K:	D: 2-3-4-5-6-7-9-10-11-18	

Adoption Counselor Notes

A# _____

Does client have other pets in the house? Were appropriate meets (dog/resident dog, dog/cat, etc.) conducted?

Chameleon notes (reason for relinquishment, behavior considerations)

Medical history (condition, treatment)

ARF (reason for ARF status, follow up phone calls will occur 3 days, 10 days, 8 weeks)

ADOPTED _____

Discussed by:

Front desk initials _____ Kennel initials _____

Hold information:

1st Hold/2nd Hold

ID # _____ Kennel _____

End _____ Extended to _____

Initials _____

1st Hold/2nd Hold

ID # _____ Kennel _____

End _____ Extended to _____

Initials _____

1st Hold/2nd Hold

ID # _____ Kennel _____

End _____ Extended to _____

Initials _____