**B.A.A.R.K.**

**Barrington Area Animal Rescue and Kennels NFP**

**Adoption Application**

Thank you for your interest in adopting a dog from B.A.A.R.K. Dog Rescue.

To initiate the process, we ask that you please complete all questions on the application to follow, to the best of your ability. There are no right or wrong answers. We want to learn more about you and your household, so we can provide the most successful adoption experience possible. Thanks again for your interest in undertaking this lifesaving commitment.

Date of Application (Month/Date/Year):

Applicant’s Full Name:

Applicant’s Age: \_\_\_\_\_\_\_\_\_\_

Spouse/Significant Other’s Full Name:

Applicant’s Age: \_\_\_\_\_\_\_\_\_\_

Applicant’s Full Address :

City, State, Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone Number:
Cell Phone Number:

Email Address:

Best time/means to reach you:

Name of the dog you are applying to adopt (if a specific dog is of interest):

Why are you interested in this particular dog?

If not interested in a specific dog, are you interested in a specific breed?

If so, what breed(s)?

**ABOUT YOU**

Occupation – Please provide the name and phone number of your employer as well as the occupation and hours worked (away from home) /day for employed household members.

|  |  |
| --- | --- |
|  **About You** |  **About Your Partner** |
| Company Name |  | Company Name |  |
| Address |   | Address |  |
| City/State/Zip |   | City/State/Zip |  |
| Occupation |   | Occupation |  |
| Years at Company |   | Years at Company |  |
| Company Phone # |  | Company Phone # |  |
| Hours Worked (incl commute) |   | Hours Worked (incl commute) |  |

What are your daily hobbies/the activities of interest to you and your family?

**YOUR RESIDENCE**

Do you…

[ ]  Own a house? [ ]  Own townhome/condo [ ]  Rent apartment?

[ ]  Rent a house? [ ]  Rent townhome/condo?

[ ]  Other? Please explain:

How long have you lived at your current address?

Does your municipality have ordinances limiting the number of dogs, size of dogs, or breed of dogs that you may have within your household? [ ]  Yes [ ]  No

If your home is governed by a homeowners association, does it set forth such restrictions?

 [ ]  Yes [ ]  No

If “yes” to either of these questions, will you remain in compliance with the adoption of this dog?

 [ ]  Yes [ ]  No

If you rent:

If you rent, does your rental agreement permit pets? [ ]  Yes [ ]  No

Have you received permission from the landlord to have a pet/additional pets? [ ]  Yes [ ]  No

Does your rental agreement limit the number of dogs, or the size of dogs, or breed of dogs that you may have on your property? [ ]  Yes [ ]  No

Please provide your landlord’s name and phone number:

Do you have a fenced in yard [ ]  Yes [ ]  No
Is it fully fenced [ ]  Yes [ ]  No

What kind of a fence do you have?

What is the height of the fence?

Approximately how large is your yard?

If you do not have a fenced yard, how do you plan to keep your new dog on your property?

**YOUR HOUSEHOLD**

Please list all persons residing in the home, relationship, and age of children under 18 years of age?

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Relationship** | **Age** | **Personality (e.g. outgoing, loud, quiet, shy)** |
|  |  |  |  |
|  |   |  |  |
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|  |  |  |  |

Does anyone in your household have allergies to animals? [ ]  Yes [ ]  No

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

Does anyone in your household smoke? [ ]  Yes [ ]  No

How would you describe the activity level in your household?

[ ]  Busy – a lot of activity and a lot of guests coming in and out

[ ]  Moderate – occasional guests and children coming in and out

[ ]  Quiet – very few guests quiet household

What kind of activities does your family enjoy?

Are all members of your household in agreement with and supportive of the decision to adopt a dog?

[ ]  Yes [ ]  No

**CURRENT & PAST PETS**

Please list all pets **currently** in your household

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** | **Breed** | **Gender** | **Age** | **Temperament/Issues** | **Source** |
|  |  |  |  |  |  |
|  |   |  |  |  |  |
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|  |  |  |  |  |  |
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Are all current pets spayed/neutered and current on vaccinations? [ ]  Yes [ ]  No

If no, please explain:

Are all your dogs on heartworm preventative? [ ]  Yes [ ]  No

If no, please explain:

Do any of your current pets have medical conditions? [ ]  Yes [ ]  No

If yes, Please explain:

How do you exercise your current dogs?

Have you owned other pets as an adult, **besides those currently residing within your household**?

If so, please provide their names, breed, and indicate what happened to them?

|  |  |  |
| --- | --- | --- |
| **Name** | **Breed** | **What Happened to this Pet?** |
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|  |   |  |
|  |   |  |
|  |  |  |

Have you ever attended obedience classes with your dog(s)? [ ]  Yes [ ]  No

If so, Where? When?

**ADOPTING A DOG FROM B.A.A.R.K.**

How did you hear about B.A.A.R.K.?

Who will be providing the majority of care for your new dog?

What kind of dog are you interested in adopting?

Size

 [ ]  X-Small (< 12 lbs) [ ]  Small (12 – 25 lbs) [ ]  Medium (26 – 50 lbs)

 [ ]  Large (51 – 80 lbs) [ ]  Extra Large (> 80 lbs) [ ]  Any Size

Age

[ ]  Puppy [ ]  Young (1 - 3 yrs) [ ]  Adult (4 - 7 yrs) [ ]  Senior [ ]  Any Age

Gender

 [ ]  Male [ ]  Female [ ]  No preference

Would your new dog be regularly exposed to any of the following? Please check all that apply

[ ]  Children (under 10) [ ]  Teens [ ]  Other Dogs [ ]  Cats

[ ]  Cyclists [ ]  Joggers [ ]  Traffic (foot or auto) [ ]  Dog Parks

What are your thoughts about DOG PARKS?

What are your thoughts about DOGGIE DAY CARE?

Would you use such programs? If so, when?

Are you willing to work with your dog so he/she develops good household habits?

(Examples: housebreaking, not jumping on people, taking treats gently? [ ]  Yes [ ]  No

Are you open to adopting a dog requiring behavioral training? [ ]  Yes [ ]  No

Are you willing to take your new dog to obedience training classes? [ ]  Yes [ ]  No

What behaviors would you find difficult to handle and might cause you to return your dog to B.A.A.R.K.? (Please check all that apply.)

[ ] Destructive chewing [ ]  Jumping on people [ ] Excessive barking [ ] Dominance

[ ] Stubbornness [ ] Aggressive behavior [ ] Nervous/Shy behavior [ ] Overly energetic

[ ] Overly protective [ ] Nipping at heels [ ] Herding (children, other animals) [ ]  Housebreaking

What characteristics in a dog would not suite your household?

What behavior(s) would result in your returning your dog to B.A.A.R.K.?

Are you familiar with crate training? [ ]  Yes [ ]  No

Are you willing to crate your dog, as needed? [ ]  Yes [ ]  No

Are you willing and confident you can provide your dog any needed medications? [ ]  Yes [ ]  No

What brand of food do you plan to feed your new dog?

(If suggestions are needed, please discuss with your B.A.A.R.K. representative)

How long do you feel your new dog should be given to adjust to your household?

Where will your new dog be kept/allowed access in your home during the day?

Where will your new dog sleep at night?
Where will your new dog be kept when you are not at home?

How many hours each day will your new dog be left at home alone?
If your dog will be left home alone for more than 8 hours during the day, what arrangements can you make to have someone walk the dog?

How do you plan to exercise your dog? How often?

Will all the members of the household be available for participation in the adoption process?

 [ ]  Yes [ ]  No

If not, please explain?

Are you willing to allow a B.A.A.R.K. Adoption Coordinator to visit your home for an interview with your family as well as to inspect the environment in which the new dog will live? [ ]  Yes [ ]  No

What is the name & phone number of your vet/animal care center?

Do you understand that the dogs that we bring into our adoption program may be unpredictable and that we cannot guarantee that the dog may not become aggressive? [ ]  Yes [ ]  No

Are you willing to accept any “unknowns” as well as potential risks involved in adopting a dog and making him/her a lifetime family member? [ ]  Yes [ ]  No

**REFERENCES**

Please provide the name, phone number, and email for three personal references. These must be people who do not live with you and who are not related to you but are familiar with your household or animal care-giving skills. We suggest your dog trainer, dog-sitter, neighbor, co-worker. Please indicate their relation to you.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Relationship** | **Phone Number** | **Email Address** |
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|  |  |  |  |

I confirm that all of the information provided on this application is true and correct. I understand that submission of this application does not automatically mean I will be approved as an adoptive home for B.A.A.R.K. Dog Rescue. **B.A.A.R.K. reserves the right to deny any adoption applicant for any reason.**

Print Name:

Signature:

Date:

Accepted/reviewed by: Date: