



5. Where will your dog stay during the times that family will be at home (when dog is not potty trained):

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6. Where will your dog stay during times when no one is at home (when dog is potty trained):

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7. Where will your dog stay during the times that family will be at home (when dog is potty trained):

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8. Do you have an enclosed yard? Y  N  If yes, how tall is the fence? \_\_\_\_\_

9. Do you have a pool Y  N  if answer is yes, is it enclosed by a locking gate? Y  N

10. Where will your dog sleep (when not potty trained)? Please select appropriate box:

- Inside in crate
- Inside free roam
- Outside in dog house, kennel or crate
- Outside in dog run
- Outside free roam
- Laundry room
- Garage

Other \_\_\_\_\_

11. Where will your dog sleep (when potty trained)? Please select appropriate box:

- Inside in crate
- Inside free roam
- Outside in dog house, kennel or crate
- Outside in dog run
- Outside free roam
- Laundry room
- Garage

Other \_\_\_\_\_

12. Please describe a typical week for you and your family members and explain how long you will be away from home during the day?

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13. Who will be primarily responsible for the dog's care? \_\_\_\_\_

14. Do all members of your household want a dog? Y  N  If no, who is not in favor? \_\_\_\_\_

15. Do you know that dogs require yearly vaccinations? Y  N

16. Do you plan to walk or otherwise exercise your dog every day? Y  N

17. How are you planning to obedience train your dog?

18. What will you do if your dog develops behavior problems?

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19. Are you willing to give the dog back to EOE if you cannot care for him/her anymore? Y  N

20. Do you currently have a veterinarian? Y  N

If yes, please supply contact information:

Name                      Address                      City/State/Zip                      Phone

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21. Are you aware that veterinary costs can be quite high sometimes in the thousands of dollars and are you financially able and willing to take care of any medical issues that may arise with your dog? Y  N . If not, what is your plan if your dog needs medical care that you cannot afford?

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22. Are you familiar with Care Credit if you do not have cash available to pay your vet bills? Y  N

23. Do you understand that you will be sharing your life with a dog for 10-20 plus years who is totally dependent upon you for food, shelter, health, veterinary care and quality of life? Y  N

24. Are you willing and able to make this lifelong commitment to a dog as a family member? Y  N

### **Family Information**

25. No. of adults in household: \_\_\_\_\_ No. of children in household, and age(s): \_\_\_\_\_

26. Do you have children that visit you? Y  N  If yes, what are their age(s)? \_\_\_\_\_

27. No. of other pets currently in household: \_\_\_\_\_

Please describe each pet below:

Type of Animal	Age	Gender	Spayed/Neutered	Where Pet Lives

28. Besides the pets listed above, please list the number of all past companion animals. Use back of form if you need more room to list your past pets: \_\_\_\_\_

Please describe each pet below:

Type of Animal	Age	Gender	Spayed/Neutered	Where Pet Lived	What Happened to Them?


29. Have you ever had to re-home or take a dog to the shelter? Y  N  If yes please explain

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30. Do you own or rent? Own  Rent  If rent, please supply contact information:

Landlord Name Phone Dog Size Limits

(we must verify with your landlord that the dog you are interested in is allowed at your rental)

31. What plans do you have for your dog if you have to move or something unforeseen happens and you can no longer take care of your dog? If your next residence does not allow dogs, what backup plans do you have?

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31. If you are unable to be at home with your dog for a lengthy period of time (e.g. vacation, emergency travel, or business travel), who will take care of your dog in your absence?

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32. Would you agree to a home visit to ensure it is secure for a pet? Y  N

33. Please list 3 references of people who know you and can vouch for your character:

Name Relationship Phone Email

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

34. Top 5 reasons folks give up their dogs:

- a. Moving/Divorce
- b. Do not have enough time for dog.
- c. Dog is too rambunctious, chews, digs, barks, etc, etc
- d. Pregnancy or not working around their young children
- e. Aggression issues

Do you think that you will run into any of the issues above that may make you consider giving up your dog? Y  N

Please consider your current situation and also on what the future looks like for you. Taking care of a dog can be a challenging experience for some people. Dogs need a great deal of attention and training for you to have a successful relationship with your dog. Walking\exercising and training your dog are the biggest time commitments that we face when having a dog companion. Neglecting to do these things with your dog can result in behavioral issues convincing some people to “get rid” of their pet because they are too destructive or disruptive to you. As our children depend upon us to provide care, love and guidance, so do our dogs. Please be sure you have thought this out and are ready to devote all of the time necessary to providing a loving, stable home for a dog companion.

**Please read and certify the following:** By submitting this form I certify that all information I have provided on this application is true, and I understand that false information my void this application. I agree that upon adopting a dog from EOE Rescue, I will agree and abide by their Adoption Agreement.

Signature \_\_\_\_\_

Date \_\_\_\_\_