You may fill this form out online, "Save As" then attach it to an email back.



PawPADs RELEASE DOG APPLICATION

APPLICANT Address: ______ City/State/Zip: ____ Telephone: Home ()______ Cell ()_____ OTHER MEMBERS OF HOUSEHOLD Name: _____ Age: ____ Name: Relation to applicant: Age: Why are you interested in adopting a PawPADs released dog? HOUSEHOLD How long at present address? Do you own or rent your home? _____ If renting, provide landlord's name and phone: Do you have a securely fenced yard? yes (Fence height:) No An enclosed dog run? Yes (Fence height:) No Is anyone in your home allergic to dogs? ______

Have you ever take type of class?	_ If yes, what				
What is the numbe	r of hours per day th	ne dog would spe	end alone (without peopl	e)?	
Where would the dog be when alone? OTHER PETS					
Breed	Age	Sex	Spayed/Neutered? (If no, why not?)	What became of this dog?	
Where do they sleep?					
Where would your new dog sleep?					
How often do you have visitors to your home?					
What would you do with your pets when you vacation or travel?					
What recreational activities do you enjoy?					
May we make a home visit prior to placing a dog with you?					
Do you have a pref	erence for a male or	a female?			
Do you have a preference for a certain breed or mix?					
Please give a brief description of your "ideal" dog:					

Have you ever had a dog with a behavioral problem? If yes, please describe what you did about it:
Do you know how to groom a dog?
Have you ever had to re-home a dog?If yes, please tell why and what you did about:
Should you receive one of our dogs, would you like some basic training from one of our trainer with your new pet?
VETERINARY CARE Please list the names and addresses of veterinarians that see or have seen your pets.
Name:
Address and phone:
Name:
Name:Address and phone:
Most dogs released from the program are young adult dogs that are deemed unsuitable to become assistance dogs for medical or behavioral reasons.
Are you willing to accept a dog released for a medical condition?YesNo
Some of the behavioral characteristics that preclude a dog from becoming an assistance do may require additional training and/or appropriate management/supervision. However, due to our limited staff resources and time available PawPADs cannot always provide ongoing training or support for released dogs and their families. We are certainly willing to do as much as we can and we can consult by phone or email and will make every effort to be available for consult/training session.
Are you willing to seek, acquire and take financial responsibility for any additional training?yesno

Please check the characteristics that	you are able and willing to work with:
Inappropriate Chewin Separation Anxiety	ng strong leadership) ate) Barking el sitivity to unfamiliar noises/people/objects)
Training Issues (low tr	rainability, distractibility)
Comments:	
contacting you to clarify some of th	mplete this questionnaire. After we receive it, we may be answers. We will keep your application in our files and view all questionnaires for potential matches and schedule dog.
that your circumstances may have chelsewhere, or the available dog may	to meet or take a dog when we call you. We understand hanged by then and that you may have already found a dog y not be appropriate. If your circumstances change before dogs, please call us so that we can remove your application
	n your search for a companion, and we appreciate your

I understand that dogs released from the program are not suitable for placement to work with a person with a disability. I agree, therefore not to attempt to place a released dog as an assistance dog, either on my own or through a third party.

I understand that completing this application does not guarantee that I will receive a dog from Pawsitive Perspectives Assistance Dogs (PawPADs). I understand that PawPADs matches each individual dog with a home that meets the specific needs of the dog and the adopter(s). Therefore, placement with a dog is not based on the length of time an application is on file and there is no way to predict if or when an appropriate dog may become available. I understand that it is my responsibility to keep PawPADs informed of changes in my address and phone number as well as changes in my interest in adopting a dog. I understand that my application will be kept on file.

To the best of my knowledge, the information that I have provided on this Release Dog Application is true and accurate.

Signatures(s):		
Applicant	Date	
Applicant	Date	