

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



**PawPADs RELEASE DOG
APPLICATION**

APPLICANT

Name: _____

Address: _____

City/State/Zip: _____

Telephone: Home () _____ Cell () _____

Email: _____

OTHER MEMBERS OF HOUSEHOLD

Name: _____ Relation to applicant: _____ Age: _____

Name: _____ Relation to applicant: _____ Age: _____

Name: _____ Relation to applicant: _____ Age: _____

Name: _____ Relation to applicant: _____ 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 taken a dog to any kind of dog training class? _____ If yes, what type of class? _____

What is the number of hours per day the dog would spend alone (without people)? _____

Where would the dog be when alone? _____

OTHER PETS

Please list all dogs currently in your home and/or that you have had in the past:

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 preference 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 it:

Should you receive one of our dogs, would you like some basic training from one of our trainers 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: _____

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? _____ Yes _____ No

Some of the behavioral characteristics that preclude a dog from becoming an assistance dog 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 a consult/training session.

Are you willing to seek, acquire and take financial responsibility for any additional training?
_____ yes _____ no

Please check the characteristics that you are able and willing to work with:

- _____ Aggression (dogs/cats/other animals)
- _____ Aggression (people)
- _____ Assertiveness (requiring strong leadership)
- _____ Excessive (inappropriate) Barking
- _____ Excessive Energy Level
- _____ Fearful Behavior (sensitivity to unfamiliar noises/people/objects)
- _____ Inappropriate Chewing/Digging
- _____ Separation Anxiety
- _____ Toileting issues (not housetrained, marking, submissive urination, indiscriminate toileting)
- _____ Training Issues (low trainability, distractibility)

Comments:

Thank you for taking the time to complete this questionnaire. After we receive it, we may be contacting you to clarify some of the answers. We will keep your application in our files and, when dogs become available, we review all questionnaires for potential matches and schedule an appointment for you to meet the dog.

You are never under any obligation to meet or take a dog when we call you. We understand that your circumstances may have changed by then and that you may have already found a dog elsewhere, or the available dog may not be appropriate. If your circumstances change before we do contact you about one of our dogs, please call us so that we can remove your application from our waiting list.

We thank you for thinking of us in your search for a companion, and we appreciate your patience. As always, please feel free to contact PawPADs if you have any further questions.

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