

## Adoption Application

Thank you for considering Canine Country School for your next four legged family member. We are dedicated to positive training programs that are tailored for each of our dog’s individualized goals. It is our sincere hope that we match our dogs with the best possible handler(s).

Please provide complete, legible, and accurate information. Time necessary to verify information will differ from case to case; a minimum of 24 hours is required for processing.

Again, thank you so much for you interest and time.

**Filling out an application does not guarantee approval for adoption.**

**Incomplete applications will not be processed.**

The adoption fee is \$150.00 & includes: A \$50.00 return after 3 private lessons are completed within the first 6 months of ownership. Spay/Neuter surgery prior to adoption.

Applicant information - Please PRINT all information.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Mailing Address if different from above.

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer Contact Info: \_\_\_\_\_

Telephone Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email Address: \_\_\_\_\_

Veterinary Care Provider: \_\_\_\_\_

Residence Information

You live in a (Check one): Apartment \_\_\_\_\_ Condo \_\_\_\_\_ Townhouse \_\_\_\_\_

Trailer/Mobile Home \_\_\_\_\_ House \_\_\_\_\_

Other (explain) \_\_\_\_\_

Do you OWN or RENT or OTHER (explain): \_\_\_\_\_

If you rent or live with family, please fill out the section below. (Skip if you own the property)

Landlord/Property Owner Name: \_\_\_\_\_

Landlord/Property Owner Name Phone: \_\_\_\_\_

Have you received a landlord's approval? \_\_\_\_\_

Have all members within the household given consent to the adoption? \_\_\_\_\_

Have all members of the household agreed to implement the training the dog has received and accomplished in every daily life? \_\_\_\_\_

How long have you lived at your present address? \_\_\_\_\_

Do you plan on any big environment changes or life changing events occurring in the near future? \_\_\_\_\_

Do you have a swimming pool or near a water source? \_\_\_\_\_

Will the animal have access to the pool/water source? \_\_\_\_\_

Does your park, condo, apartment or homeowner's association have any breed, size or other restrictions?

\_\_\_\_\_

If so, explain what the restrictions are. \_\_\_\_\_

What kind of containment system do you plan to use? \_\_\_\_\_

Household information

Names and ages of ALL adults living at residence (18+): \_\_\_\_\_

\_\_\_\_\_

Names and ages of ALL minors/children living at residence: \_\_\_\_\_

\_\_\_\_\_

Do you have neighboring animals next to you? \_\_\_\_\_

How much dog/dog interaction do you think the dog will be exposed to? \_\_\_\_\_

How much foot traffic do you have coming in and out of your home? (Visitors, customers, etc.) \_\_\_\_\_

\_\_\_\_\_

If you have pets, do they show any behavioral problems? \_\_\_\_\_

If yes, what are they? \_\_\_\_\_

How do you choose to handle a dog that is expressing negative behavior? \_\_\_\_\_

\_\_\_\_\_

Do you own livestock? \_\_\_\_\_

Provide names and descriptions of ALL current household pets:

Pet's Name	Type/Breed	Male/Female	Age	Spayed/Neutered	Time Lived in Home
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

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\_\_\_\_\_

Animal Care Plan

Where will your dog spend its day? (Check all that apply)

Indoors \_\_\_\_\_ Outdoors \_\_\_\_\_ Crated \_\_\_\_\_ Garage \_\_\_\_\_ Porch \_\_\_\_\_ Shut in Room \_\_\_\_\_

Dog Kennel \_\_\_\_\_ Fenced Yard \_\_\_\_\_ Tied Outside \_\_\_\_\_ Loose/Unfenced \_\_\_\_\_

With Me \_\_\_\_\_ Dog House \_\_\_\_\_ Doggie Day Care \_\_\_\_\_ Other (explain) \_\_\_\_\_

How long will your dog be left alone on average?

Almost never \_\_\_\_\_ 1-3 hours \_\_\_\_\_ 4-7 hours \_\_\_\_\_ 7-9 hours \_\_\_\_\_ 9 hours and over \_\_\_\_\_

How many days of the week are you home? \_\_\_\_\_

What outdoor containment/housing do you have? \_\_\_\_\_

What are your thoughts on the use of aversive techniques or tools such as:

Shock collars \_\_\_\_\_ Training collar \_\_\_\_\_

Scruffing \_\_\_\_\_ Alfa Roll Over \_\_\_\_\_

How do you best handle a situation when you're frustrated? \_\_\_\_\_

What your coping mechanism? \_\_\_\_\_

A pet is a monthly expense - what kind of food do you plan on feeding your dog? \_\_\_\_\_

How will urination/defecation be handled? \_\_\_\_\_

Do you plan to keep your dog in a fenced yard? \_\_\_\_\_ If yes, what type of fence do you have and how high is your fence? \_\_\_\_\_

The dog you are applying for has received professional training and has worked very hard to improve behavior, what is your plan to continue the training that has been set in place? \_\_\_\_\_

Do you have experience with a dog with behavior issues? \_\_\_\_\_

Do you have experience with dogs that do not like other dogs? \_\_\_\_\_

If yes, explain in great detail. (The more details the better.) \_\_\_\_\_

Do you have experience with dogs that do not appreciate people (strangers, children, etc.)? \_\_\_\_\_

If yes, explain in great detail. (The more details the better) \_\_\_\_\_

What veterinary care provider do you use or have used? \_\_\_\_\_

Do you have experience with a high drive/aggressive dog? \_\_\_\_\_

If so, how did you handle it? \_\_\_\_\_

Have you been convicted of a felony? \_\_\_\_\_

If so please explain on a separate piece of paper.

Give information about your current parole status.

Name and contact information of parole officer: \_\_\_\_\_

References – Must have a total of 3 references

Landlord (if you rent) Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Veterinary Care Provider Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Other Reference: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Other Reference: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Other Reference: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Responsible Dog Owner's Pledge

\_\_\_\_\_ I will be responsible for my dog's health needs. These include:

- Routine veterinary care including check-ups and vaccines
- Adequate nutrition through proper diet; clean water at all times
- Daily exercise and regular bathing and grooming (nails trimmed, ears cleaned, brushed)
- Emergency veterinary care if need be

\_\_\_\_\_ I will be responsible for my dog's safety.

- I will properly control my dog by providing fencing where appropriate, not letting my dog run loose, and using a leash in public.
- I will ensure that my dog has some form of identification when appropriate (which may include collar tags, tattoos, or microchip ID).
- I will set my dog up for success in a stressful situation
- I will provide adequate supervision when my dog and children are together.

- I will provide adequate supervision when my dog is greeting other people and dogs

\_\_\_\_\_ I will not allow my dog to infringe on the rights of others.

- I will not allow my dog to run loose in the neighborhood.
- I will not allow my dog to be a nuisance to others by barking while in the yard, in a hotel room, etc.
- I will pick up and properly dispose of my dog's waste in all public areas such as on the grounds of hotels, on sidewalks, parks, etc.

- I will pick up and properly dispose of my dog's waste in wilderness areas, on hiking trails, campgrounds and in off-leash parks.

\_\_\_\_\_ I will be responsible for my dog's quality of life.

- I understand that basic training is beneficial to all dogs.
- I will give my dog attention and playtime.
- I understand that owning a dog is a commitment in time and caring.
- I understand I must commit myself to whatever training program has been set for the dog in my daily life.
- I will never discipline my dog out of anger and frustration
- I will choose to maintain a calm assertive energy toward my dog

\_\_\_\_\_ In the event you are no longer able to keep the adopted dog, he/she MUST be returned to the Canine Country School.

\_\_\_\_\_ I understand his/her microchip will maintain canine country school's contact information

Please sign here as a statement that you have filled out this application survey honestly.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Print, Fill Out and Mail this Form to:**

**Canine Country School, LLC**

**14503 Colorado River Road**

**Gypsum, CO 81637**