

Animal: \_\_\_\_\_ Date: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ S/N Date: \_\_\_\_\_

**ADOPTION QUESTIONNAIRE AND AGREEMENT FORM**

*The SPCA is a private organization that acts for the best interest of the animals in our care. This application is a tool to assure we are placing the animals in the most appropriate home. Please answer honestly and fully, and ask a staff member if you have questions. Applications that are not completely filled out may be denied automatically pending the needs of the animal. We will review your application, which can take up to 24 hours, and contact you regarding whether we will move forward with the adoption process.*  
**PLEASE PRINT CLEARLY!**

**Contact Information & Living Arrangements**

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

Spouse/Partner First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

P.O. Box: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

-Are you 18 years of age?  Y  N Email: \_\_\_\_\_

-For whom are you adopting this animal?  Yourself  Gift  Other

-Live in a...  Single Family Home  Apartment  Mobile  Other \_\_\_\_\_

Do you...  Own  Rent

-If renting... Landlord's Name and Number: \_\_\_\_\_

-How long have you lived at this address? \_\_\_\_\_ Years \_\_\_\_\_ Months

-Do you plan to move in the next 12 months?  Y  N

-Would you be opposed to a home visit?  Y  N

-Do you have a yard?  No  Yes, no fence  Yes, fenced  Yes, underground fence

-Do you have a car and a valid driver's license?  Y  N

-How many occupants in house? \_\_\_\_\_ +18 \_\_\_\_\_ Children

Please list ages of children: \_\_\_\_\_

-How would you describe your house?  Quiet  Noisy  Active  Average

-Are any occupants allergic to animals?  Y  N If yes, how will their allergies impact the life of the animal?

\_\_\_\_\_  
\_\_\_\_\_

-Is every one in agreement with the decision to adopt a new pet?  Y  N

-Please list the positions and employers for each adult in the home \_\_\_\_\_

-Do you feel you can financially care for this animal with the cost of food, vet bills, and general upkeep? Who will have financial responsibility for this animal and how much do you think it will cost to care for your dog each year (food, vet care, supplies, toys, etc)? \_\_\_\_\_

-Have you considered the full ramifications of caring for an animal for its entire life (which has the potential to be 20+ years) including illness, injury, and old age? \_\_\_\_\_

### Animal Care

\*\*\*Dog only question\*\*\* -What kind of dog do you want and why? Be specific: \_\_\_\_\_

-Do you agree to provide regular health care by a veterinarian? Y N

-Will you provide your animal with proper flea/tick/heartworm preventative? Y N

-How many hours will the animal be left alone during the day? \_\_\_\_\_

-Where will the animal be kept during the day? Be specific (examples: indoor, outdoor, crate, gated area, etc)

-How will the animal be contained when outdoors? Be specific (examples: chain, runner, tether, fence, underground fence, leash, free roaming, etc) \_\_\_\_\_

-Where will the animal sleep at night? Be specific (examples: free roam indoor, outdoor, crate, bedroom, etc)

-Who will care for your animal while you are away? \_\_\_\_\_

-What will you do with the animal if you move? \_\_\_\_\_

-Have you ever surrendered an animal to a shelter/pound? If yes, why? \_\_\_\_\_

-Do you agree to contact us if you can no longer keep this animal? Y N

-What behaviors concern you the most? Would these lead you to return the animal? \_\_\_\_\_  
\_\_\_\_\_

-What training will you implement to address the behaviors that concern you the most? What training will you use in general? \_\_\_\_\_  
\_\_\_\_\_

-How do you plan to discipline your animal? \_\_\_\_\_

CURRENT ANIMALS				
Name/Breed	Age	Spayed or Neutered	Up to date on vaccinations?	Good with Cats or Dogs or Both
		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> B
		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> B
		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> B
		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> B
		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> B

-How did you hear about us? Online Friend/Family TV Paper Other \_\_\_\_\_

-Would you be interested in fostering and learning more about our foster program? Y N

### References

Personal references of people who are familiar with you and your pets:

Name and Number: \_\_\_\_\_

Name and Number: \_\_\_\_\_

Previous Veterinarian: \_\_\_\_\_ Current Veterinarian: \_\_\_\_\_

Can the SPCA contact your veterinarian? Y N

Have you ever had an application denied by an adoption facility? Y N

Have you ever been convicted or accused of animal cruelty? Y N

I certify that the above is true and correct. Any false information may result in the nullification of this adoption. I have done the necessary planning and budgeting in order to make this new addition to my household a welcome member of my family. I understand that all animals adopted from animal shelters in Virginia must be spayed or neutered before adoption. I further give the SPCA permission to check my veterinarian records to confirm the above information.

An adoption questionnaire is the first step in your commitment to a new animal. However, even after the application has been approved, the SPCA reserves the right to nullify the adoption at any time. If an animal must stay in the shelter to meet adoption requirements, he/she must be picked up within a stated period after spay/neuter. The SPCA cannot hold an animal indefinitely once he/she has been altered, or if there is a lack of contact with the adoptive family.

As part of your commitment to your adoption, we expect a family to contact us at least every 7 days regarding the well-being and status of their pending adoptive animal. We encourage families to visit the animal to help establish a bond. If an adoptive family has not contacted the SPCA within 10 days of the date of the application, the SPCA will consider the adoption nullified and the adoption fee will be processed as a donation. At this point the animal will be placed for adoption again.

Contact with the family will be documented on the adoption questionnaire throughout the process. By signing the adoption questionnaire, you are agreeing to this commitment.

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

SPCA Adoption Counselor: \_\_\_\_\_ Date: \_\_\_\_\_

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**OFFICE USE ONLY BELOW THIS LINE**

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**CONTACT**

*Include date, time, whether a voicemail was left, spoke to the family, phone disconnected, whether email and/or letter was sent, etc.*

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