

SMALL ANIMAL ADOPTION APPLICATION

Description of small animal of interest to applicant: Rabbit Hamster Other _____

What is the reason for adopting this pet? Companion for other pet For the children Gift
 Companionship Classroom use

Name _____ DOB _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

Social Security # _____ Driver's License #/State _____

Occupation: _____

Check one: Single home _____ Duplex _____ Apartment _____ Condo _____

If applicable, have you checked with your landlord about having a cat? _____

Number of children in household _____ Their ages _____

Have you ever owned a pet before? _____ What kind _____

If you no longer have the pet, what happened to it? _____

Are the pets you presently own spayed or neutered? YES _____ NO _____

Where did you get your other pets? _____

If you adopt an animal, will it be kept: INSIDE _____ OUTSIDE _____ BOTH _____

Vet name: _____ phone #: _____

Signature _____ Date: _____

If this pet is intended for classroom use, please answer the following:

Name of your school _____

City _____ State _____ Zip _____

Age/Grade of children _____ Number of hours school is open each day _____

Number of children _____ Number of adults _____

Who will be the main guardian (responsible person) of this pet? _____

What care arrangements have been made for the pet during weekends? _____

Extended holidays? _____

What will happen to the pet at the end of the school year? _____

Is this pet going to be part of a teaching unit you are planning? _____ If yes, how so? _____

Name of volunteer interviewing applicant _____

Signature of Animal Control Officer _____

Approved YES _____ NO _____

Comments _____
