



Animal Name: \_\_\_\_\_

Shelter ID: \_\_\_\_\_

Application Date: \_\_\_\_\_

### Small Animal Adoption Application

*Adopting an animal is a long-term commitment. Please complete this form to assist us in determining whether the animal you would like is suitable for your home and lifestyle. When selecting an animal, it is important to bring your entire family.*

**All information collected on this application is kept confidential.**

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1. Where do you learn about the KHS adoption program: \_\_\_\_\_
  2. Reason for adopting (please check)  Playmate for child  Pet/Companion  Hunting  Guard dog  
 Other: Please Describe \_\_\_\_\_
  3. Who are you adopting for:  Yourself  Someone else (please indicate): \_\_\_\_\_
  4. Are you 18 year or older:  Yes  No Date of birth: \_\_\_\_\_
  5. Do you live in a:  House  Apartment  Townhouse/Unit  Condo → Do you  Rent  Own
  6. How many people live in your household: \_\_\_\_ Adults \_\_\_\_ Kids Please list children's ages: \_\_\_\_\_
  7. Are you a student:  Yes  No → What school do you attend: \_\_\_\_\_
  8. If you are a student, what will you do with your animal when done school: \_\_\_\_\_
  9. Is everyone in your household in agreement that you adopt this small animal:  Yes  No
  10. Is anyone in your household allergic to pet dander, hay, shavings or grasses:  Yes  No
  11. Will the animal be housed outside:  Yes  No → Will the animal be allowed outside  Yes  No
  12. Will the primary home be:  Aquarium  Wire cage  Own room  Free run of home  Other (explain): \_\_\_\_\_
  13. How much time will be given daily to exercise and play (in hours): \_\_\_\_\_
  14. What will you feed your animal: \_\_\_\_\_
  15. Do you have any pets currently:  Yes  No → Please listed quantity, species, age, sex: \_\_\_\_\_
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16. If you have pets currently, are their vaccines up to date:  Yes  No → Are they spayed/neutered  Yes  No
  17. If you do not have pets currently, have you had pets in the past  Yes  No
  18. If yes, what became of them:  Gave away  Died (How? Age, disease \_\_\_\_\_)  Other: please indicate \_\_\_\_\_
  19. Were you the primary caregiver  Yes  No  Other (ie: family pets) \_\_\_\_\_
  20. Have you lost a pet to an infectious disease in the last 6 months:  No  Yes please indicate: \_\_\_\_\_
  21. Have you surrendered/rehomed a pet to an OSPCA, Humane Society, Pound or Person in the last 6 months:  
 No  Yes if yes, please explain: \_\_\_\_\_
  22. For what reason would you consider giving up/rehoming your pet: \_\_\_\_\_
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23. Have you adopted from KHS before:  Yes  No
  24. Would you permit a home visit by one of our staff to ensure this is a good visit for the dog you wish to adopt:  
 Yes  No
  25. Do you have a veterinarian with small animal experience:  Yes  No
  26. How often should your small animal see a veterinarian:  
\_\_\_\_\_
  27. How much do you expect to spend per year on your dog, including but not limited to: food, vet costs, etc.....  
 \$50-\$100  \$100-\$300  \$300-\$500  \$500-\$1000  >\$1000
  28. Is there anything else you would like us to know as we begin to process your application: \_\_\_\_\_
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Name: \_\_\_\_\_  
 Shelter ID: \_\_\_\_\_  
 Application Date: \_\_\_\_\_

**Dog Adoption Application**

*Adopting an animal is a long-term commitment. Please complete this form to assist us in determining whether the animal you would like is suitable for your home and lifestyle. When selecting an animal, it is important to bring your entire family.*

**All information collected on this application is kept confidential.**

YOUR INFORMATION	REFERENCES	
<i>By signing below, I certify that the information I have provided is true.</i>	Please authorize your veterinarian to release information to the KHS. If you do not have a veterinarian, please list two personal references.	
Name (please print):	<b>Reference #1: Veterinarian</b>	
Signature:	Name:	
Address:	City: <span style="float: right;">Tel:</span>	
City: <span style="float: right;">Province:</span>	<b>Reference #2: Personal</b>	
Postal Code:	Name:	
Telephone:	City: <span style="float: right;">Tel:</span>	
Alt. telephone:	<b>Reference #3: Employer</b>	
Email:	Name:	
<b>STAFF USE ONLY</b>	City: <span style="float: right;">Tel:</span>	
	Application Received: Date: _____ Time: _____ Initial: _____	
	1. Application: <input type="radio"/> Approved <input type="radio"/> Denied Initial: _____	
	2. References: <input type="radio"/> Approved <input type="radio"/> Denied Initial: _____	
3. Check if applicant is in PP: <input type="radio"/> Notes on reverse		
4. Adoption approved? <input type="radio"/> Yes <input type="radio"/> No Initial _____		
5. Notification of approval/denial: Date: _____ Initial: _____		
<b><i>The KHS reserves the right to refuse adoption to any individual. We will not release the reason for refusal.</i></b>		

STAFF USE ONLY Additional Animals	STAFF USE ONLY Additional Animals
Name: _____ Shelter Number: _____	Name: _____ Shelter Number: _____
Application Received:	Application Received:
Date: _____ Time: _____ Initial: _____	Date: _____ Time: _____ Initial: _____
<b>Adoption approved? <input type="radio"/> Yes <input type="radio"/> No Initial _____</b>	<b>Adoption approved? <input type="radio"/> Yes <input type="radio"/> No Initial _____</b>

**STAFF USE ONLY**

Is this for preapproval? Yes / No

**References**

Veterinarian:

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Personal #1:

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Personal #2:

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Pet Point Notes/Information:

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Questions and/or Concerns:

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Meet and greet required? Yes / No    Date: \_\_\_\_\_    Approved: Yes / No

Notification of Approval/Denial

Attempt #1    Successful? Yes / No    Left voicemail? Yes / No    Date: \_\_\_\_\_  
Attempt #2    Successful? Yes / No    Left voicemail? Yes / No    Date: \_\_\_\_\_

Adoption fee discussed: Yes / No    Date: \_\_\_\_\_

Finalized adoption date: \_\_\_\_\_

Notes:

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