



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

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

STAFF USE ONLY

Is this for preapproval? Yes / No

References

Veterinarian:

Personal #1:

Personal #2:

Pet Point Notes/Information:

Questions and/or Concerns:

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:
