

# Dog Adoption Survey



**Name \***

First

Last

**Date \***

**Address \***

**Email \***

**Phone Number \***

**Emergency Contact for Microchip \***

First

Last

**Alternative Phone Number**

**Emergency Contact Phone Number \***

**Name of the dog that you are interested in:**

**I have owned a dog before \***

- Yes  
 No

**If you are not applying for a specific dog, what are you looking for?**

**I currently own a dog \***

- Yes  
 No

**If you currently own a dog please describe them:**

**If you have owned a dog previously but do not currently own one, how long ago was it?**

**Does the dog that you are interested in need to get along with other dogs? \***

- Yes  
 No

# Dog Adoption Survey



Does the dog that you are interested in need to get along with other species of animals? \*

- Yes
- No

If answered yes above, what kind of animals?

Will your dog need to get along with children? \*

- Yes
- No

If answered yes above, how old are the children?

How long will your dog be alone each day? \*

Will the dog you are interested in be primarily indoors or outdoors? \*

- Indoors
- Outdoors

If answered outdoors, please elaborate:

Will you be crate training your dog? \*

- Yes
- No

How high energy of a dog are you prepared for? \*

- Low Energy
- Somewhat Energetic
- Very Energetic

I am prepared to train with my new dog \*

- Yes
- No

I am interested in a dog with medical or behavioural needs \*

- Yes
- No

What is most important to you about the dog you are adopting? \*