ADOPTION QUESTIONNAIRE

Thank you for visiting The Florida Keys SPCA in your search for a new pet! Florida Keys SPCA Adoption Counselors consult this information to ensure the animal you want to adopt is best suited to you, your home and lifestyle.

Pets interested in adopting: 1.___________________ 2._____________________ 3._______________________

Adopter’s Name(s):____________________________________________________________________________
Current Address: __________________________________________________________
Apt #:__________ City: ___________________________________State:________ Zip: ___________________
How long have you been at this address? __________________________________________________________
Phone: Home: __________________ Work: __________________ Cell: ____________________
E-Mail:______________________________________________________________________________________
Current Employer: ________________________________________ Phone:______________________________
If you are not employed, who will be financially responsible for this pet? _______________________________

Looking to adopt: □ Dog □ Cat □ Rabbit □ Other______________
What breed(s) of pet are you looking for? ____________________________________________________________
What sex of pet are you looking for? □ Male □ Female □ No preference
What characteristics do you want in a pet? (calm, active, etc.)________________________________________

Activity Level: □ Low □ Medium □ High □ No preference
Are you a: □ 1st time dog owner □ 1st time cat owner □ Had pets in the past
Have you ever adopted from FKSPCA? □ Yes □ No If yes, when?______________________________
What pets have you owned in the past 5 years?

<table>
<thead>
<tr>
<th>Name of Pet</th>
<th>Type or Breed of Pet</th>
<th>Age</th>
<th>Sex</th>
<th>Licensed?</th>
<th>Spayed or Neutered</th>
<th>If no longer owned, what happened to the pet?</th>
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What is the name of your veterinary hospital? __________________________________________________________

Reason for wanting this pet (Check all that apply):
□ Family companion □ Gift □ Mouser □ Guard dog □ Hunting □ To breed □ For my children
□ Personal Protection □ Companion for other animal □ Other (Specify)____________________________

Does any member of the household have animal-related allergies or asthma? □ Yes □ No

How much do you anticipate spending yearly on this pet (food, medical, toys, emergencies, etc.)?________

Do you live in a: □ House □ Apartment □ Housing □ With parents □ Boat
□ Mobile home (Name of Park______________________________) □ Military housing
Do you rent? □ Yes □ No If yes, Landlord Name_________________________ Phone_________________________
How many adults are in the household? ____________

Children? ________________

Age(s) of children _______________________

Where will the pet be kept: When someone is home? □ Indoors □ Outdoors
When no one is home? □ Indoors □ Outdoors

How many hours a day will the animal be left alone? ______________________________________

If you are adopting a dog:
How will the dog be confined when outside? _____________________________________________

How do you plan on exercising your dog? ______________________________________________

Do you plan on taking an obedience class? □ Yes □ No

Please check ALL of the following topics you would like to discuss with the Adoption Counselor or Dog Trainer:

☐ Spaying/Neutering ☐ Diet/Nutrition ☐ Diseases/Viruses ☐ Vaccinations
☐ Cost ☐ Exercising ☐ Introducing other pets ☐ Introducing children
☐ Biting ☐ Indoors vs. outdoors ☐ Housebreaking ☐ Containment
☐ Spraying ☐ Jumping on counters ☐ Litter training ☐ Declawing
☐ Scratching objects ☐ Chewing ☐ Crate training ☐ Digging
☐ Jumping ☐ Barking ☐ Obedience training ☐ Other ____________________

By signing, I affirm I am 21 years of age or over, and the information contained in this form is true to the best of my knowledge. I understand that FKSPCA Adoption Counselors may approve or deny an adoption based on this or other information during my visit. Should I be approved for adoption, I understand that I will be required to make a substantial commitment of time and money to this animal for up to 20 years.

Signature: ________________________________________________ Date: _______________________

FOR STAFF USE ONLY

Counselor:________________________________________________________

Person ID#________________________ Searched by:________________________ # of animals shown______

Driver's License/ID #________________________ Date of Birth_______________________

Emergency Contact Name ____________________________ Phone No. ______________________

Comments:________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________
Our goal is to find a loving, life-long home for each animal in our care. We strive to find the most suitable pet for each person and the most suitable home for each animal. To reach that goal we consider both the lifestyle and expectations of potential adopters and the personality and needs of each animal. We welcome the opportunity to help match you with a wonderful companion and ask that you keep in mind the following guidelines to adopting from the Florida Keys SPCA.

1. All potential adopters are asked to complete an adoption profile and provide a valid form of identification with a current address.
2. We adopt companion animals to be placed into a home setting. All animals must be provided with adequate food, water, shelter, exercise, veterinary care, and companionship.
3. Adopters will adhere to all City and/or County codes regarding animal ownership.
4. To comply with State law, all animals are required to have a rabies vaccination before leaving the shelter. If an animal is too young, the adopter can prepay for the vaccination with the veterinarian of their choice and present the receipt before adoption.
5. All animals will be spayed or neutered, microchipped and licensed before adoption.
6. Adopters must be 21 years or older.
7. No more than one dog per household may be adopted in a 30 day period.
8. Adopters must provide proof that current housing allows for pet ownership, either in the form of property ownership or a lease agreement that allows pets.
9. We ask that all cats remain indoors for their safety as well as the safety of wildlife. If you chose not to keep a cat indoors, we ask that you adopt an adult cat that has already been allowed to go outside.
10. To ensure that all members of the adopting household are in agreement with regards to the adoption of a particular animal, we ask that all members of the household, including dogs, meet and interact with the prospective new pet prior to adoption.
11. Adoptions cannot be made as gifts unless the recipient is present to interact with the animal and provide required information. Gift certificates are available as an alternative.
12. No adoptions will be made to an applicant who is suspected of being under the influence of alcohol or drugs during the time of application.
13. Applicant’s current animals shall have proof of current vaccinations and current license (where appropriate) before adoption is complete.
14. Cats that are currently declawed will be adopted with the intention of keeping them inside at all times for their safety.
15. FKSPCA will not adopt to anyone who has the intention of ear cropping, tail docking, or declawing of their animals.
16. Due to the Monroe County anti chaining Ordinance 4-70 the FKSPCA cannot condone the practice of keeping dogs tethered or chained.
17. No adoptions will be made to any individual with a history of animal neglect, abandonment, or abuse.

Failure to adhere to policy agreement will cause ownership of adopted animal to revert back to FKSPCA.

Signature of applicant that policies have been read and are understood_____________________________________

Date: ____________________