



## ADOPTION APPLICATION

Pet ID#: \_\_\_\_\_ Pet Name: \_\_\_\_\_ Species: Cat / Dog / Other: \_\_\_\_\_

*Please note: The application process normally takes 5-7 working days. Meet & Greet (with people and dogs) are by appointment. Cats need to go home in a carrier and dogs with a leash and collar. The SPCA Windhoek retains the right to turn down this application.*

### About You

Title: \_\_\_\_\_ Prof. / Dr. / Mr. / Ms.

Name and Surname: \_\_\_\_\_ ID#: \_\_\_\_\_

Home address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Name of Company: \_\_\_\_\_

Address where pet will be kept: \_\_\_\_\_

Reason for wanting to adopt a pet: \_\_\_\_\_

Is the pet for yourself? Yes / No. Explain if not for you: \_\_\_\_\_

Is this pet a replacement for another pet? Yes / No. If yes, what happened? \_\_\_\_\_

How many people live in your house? \_\_\_\_\_ Ages: \_\_\_\_\_

Do you or anybody in your family have any pet allergies?  Yes  No

How would you describe your home?  Busy  Quiet  Combination of Busy/Quiet

Is anyone at home afraid of pets? \_\_\_\_\_

Do you rent?  Yes  No - If renting, did owner give permission for pet(s) to be kept on the premises?  Yes  No

Do you have your own transport?  Yes  No

If not Namibian/resident, what do you plan on doing with the pet once you move? \_\_\_\_\_

### About Your Current / Previous Pets

Species	Cat/s	Dog/s	Other/s
How many pets do you currently own?			
What is the sex of your pet(s)?			
How many are sterilized? (specify M or F)			
<i>If not sterilized, please explain.</i>			
How many pets have you owned over the last 3 years?			

Please state the name of current/past pets. \_\_\_\_\_

What happened with the pets you no longer have? \_\_\_\_\_

If the pet died from sickness – did the pet die from any of these sicknesses?  Distemper  Diarrhea  Parvo  Tick-bite fever *(dog diseases)*  
 Snuffles  FIV  FELV  Diarrhea *(cat diseases)*

Who is your vet? \_\_\_\_\_ Secondary/ Previous Vet? \_\_\_\_\_

In whose name is the vet account? \_\_\_\_\_



## About Adopting a Pet

What type of pet are you looking for? Temperament:  Mellow  Medium  Active

Personality:  Friendly  Playful  Social  Independent

Affectionate  Confident  Don't mind shy

Tick if these are important to you?  Good with kids  Good with cats  Good with dogs

Other: \_\_\_\_\_

For how long do you see yourself keeping your adopted pet? \_\_\_\_\_ Years? \_\_\_\_\_ What is the average lifespan of the pet you want to adopt? \_\_\_\_\_

How much are you expecting to spend each month on your new pet? \_\_\_\_\_ (food, medical, treats, grooming, etc.)

Can you afford private vet fees?  Yes  No

What is your plan for the pet when traveling? \_\_\_\_\_

What do you plan on feeding your pet? \_\_\_\_\_

Will the pet(s) be allowed in your house? \_\_\_\_\_

Where will the pet sleep at night? \_\_\_\_\_

Will you chain this or any other pets? \_\_\_\_\_

Have you adopted a pet previously from any SPCA?  Yes  No

If yes, from which SPCA? \_\_\_\_\_ Which year? \_\_\_\_\_

## If Adopting a Dog

Are you willing to do some training with your adopted dog? Please tell us a little about your experience with training and behavior. \_\_\_\_\_

How often will your dog be exercised? \_\_\_\_\_ How? \_\_\_\_\_

Have you thought about house training your dog and how would you do this? \_\_\_\_\_

**Applicant: I hereby confirm that all information given is true and correct.**

Signature of applicant: \_\_\_\_\_ Date of application: \_\_\_\_\_

### For office use only

Adoption Counsellor: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

House Check  Vet Check  Meet & Greet (P)  Meet & Greet (D)  Cat Test  Dog Test

Application successful?  Yes  No Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Reason/notes: \_\_\_\_\_ No claim form required:  Yes  No