



Valdez Animal Shelter

PO Box 307 Valdez, AK 99686
907-835-2286

Adoption Application

Welcome to the Valdez Animal Shelter. All persons interested in adopting a pet from our shelter must complete this questionnaire. **Unanswered questions will constitute an incomplete application.**

(Please Print Clearly)

Name of Pet Interested in: _____

Your name: _____ Date: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work/Cell Phone: _____

Driver's License #: _____ Email: _____
Physical ID required to make a copy

Have you or anyone in your house ever been convicted of animal cruelty, animal neglect, child abuse or domestic violence? If yes, please describe: _____

What type of pet are you looking for? Dog Puppy Cat Kitten

Other _____

Is this your first experience with this kind of pet? Yes No

Please check any of the following reasons for adopting this pet:

Guard Dog Companion Companion for Other Pet

Family Pet Child's Pet Hunting

Sled Dog Mouser Other: _____

Do you own any pets at the present time? Yes No

If you answered yes, please list the description of your pets below.

Name	Breed/Species	Age	Fixed?	How long have you own?

How many pets have you owned in the last 5 years? _____ Cats _____ Dogs _____ Others

Please list the description of your pets below.

Name	Breed/Species	Age	Fixed?	What Happened to pet?

Where do you live? Apartment House Duplex Mobile Home
 Other (specify) _____

How long have you lived at current address? _____

Are you in the process of moving, or anticipate moving in the next few months? _____

****Information Required****

Do you give permission for staff to contact your landlord/property owner regarding application on pet? yes no Other _____

Do you? Rent your home Own your home Other: _____

Do you? Rent your property Own your property Other: _____

Landlord Name: _____ Phone Number: _____

Property Owner Name: _____ Phone Number: _____

Place of Employment: _____

What is your weekly work schedule _____

Will this pet be alone during the day? Yes No # of hours: _____

Where will this pet be kept when no one is home? _____

Will anyone else be caring for this animal when you are not home? _____

Name All Adults living in the household, please list relation, significant other, spouse, relative, roommate, or children? _____

How many children live at your house? _____ What are their ages? _____

Who will be primarily responsible for taking care of the new pet: _____

Does any of the household members have allergies affected by pets? Yes No

Where will this pet be kept at night? _____

How many hours per day will your pet be outside and why? _____

If your pet will be outside, what arrangements are you making for its safety and shelter?

If adopting puppy/dog, is there a yard available? Yes No N/A

If yes, is it fenced? Yes No Type: _____ Height: _____

Do you have experience in dog training and housebreaking?

Can you afford an unexpected vet visit? Yes No

What is your annual pet budget for this pet including food cost: _____

Do you plan on having this cat declawed? _____

If your cat stops using the litter pan what will you do? _____

How do you think your pets in the home will adjust to animal applied for?

Please feel free to write any additional comments: _____

The Valdez Animal Shelter reserves the right to refuse adoption to anyone.

Our goal for all adoptions is that the animal is placed in a good, loving, and lifetime home. The adopting home is chosen on the basis of what will hopefully be best for the animal and the adopting family, NOT who is first on the list.

In order to be considered as an adopter, you must:

1. Be over 18 years of age
2. Have the knowledge and consent of you landlord (if renting/leasing)
3. Be willing to be interviewed before a decision is made
4. Be willing and able to spend the time and money to provide training, medical treatment and proper care of the pet applied for

I certify that the above information is true and accurate to the best of my knowledge and that falsification of this information can be cause for denial of my application or revocation of the contract.

Please sign stating that you have read and understand the above

Signature _____ Date _____

