

Pit Bulls Second Chance Rescue
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Bluefield, WV 24740
304-887-3636
pitbullssecondchance@gmail.com
EIN 82-2925305

ADOPTION APPLICATION

Basic Information

Name: _____
Driver's license number: _____
Street address: _____
City/State/Zip: _____
Home Phone: _____ Cell: _____ Work: _____
Email: _____
Employer: _____
How long at current job: _____

Provide two references that are not members of your immediate family:

Personal reference #1: _____ phone: _____
Relationship: _____ years known: _____

Personal reference #2: _____ phone: _____
Relationship: _____ years known: _____

About Your Home....

Do you live in a(n)?:

House Townhouse
 Apartment/ Condo Other: _____

Your home is:

Owned, by you or your spouse/life partner
 Owned, by someone else within the house
 Rented directly from the owner or through a management company
 Rented as a part of a group of roommates
 Other: _____

If renting, is your name on the lease? YES NO _____

If renting, do you have your landlord's permission to have a dog? _____

Landlord's name and phone: _____

Who shares your household?

Spouse/Life Partner Roommate(s) # _____

Boyfriend/Girlfriend Other: _____

Are there children in the home? YES NO

If yes, how many? _____ How old? _____

At what age do you feel children are responsible enough to take care of a pet without assistance? (i.e. walk, feed, train) _____

If your present relationship/ living situation were to change and you were no longer able to care for the dog, a new application must be submitted and approved in order to transfer ownership.

Initial: _____

Do you plan to move soon? _____

Does anyone in your household have an allergy to dogs that you are aware of?

YES NO

Is someone home during the day? YES NO Who? _____

How many hours will your dog be alone each day? _____

Where will your dog spend most of his/her day when you are home?

indoors garage

yard enclosed patio

indoor/outdoor other: _____

additional info: _____

Where will the dog stay when he/she is home alone?

indoor/outdoor (doggy- door)

inside only (specify):

run of the house crate specific room(s): _____

outside only (specify):

yard garage enclosed patio other: _____

additional info: _____

When will the dog be inside? _____

When will he/she be outside? _____

Where will the dog sleep at night?

indoor/outdoor (doggy- door)

inside only (specify):

run of the house crate specific room(s): _____

outside only (specify):

yard garage enclosed patio other: _____

additional info: _____

When will the dog be inside? _____

When will he/she be outside? _____

Where will the dog sleep at night?

indoor/outdoor (doggy- door)

inside only (specify):
 run of the house crate specific room(s): _____

outside only (specify):
 yard garage enclosed patio
 dog house other: _____

What rooms are off limits? _____

And your yard.....

I do not have a yard at this time (skip to the next section)
What outside areas are available to the dog? (check all that apply)

front yard dog house
 back yard garage
 enclosed patio other: _____

Do you have a doggie door? YES NO

Is your yard shared with neighbors? YES NO

Is your yard fenced? YES NO What is the type of fence? _____

Fence height? _____ Highest point _____ Lowest Point

Have you recently inspected your fences? YES NO

Are they in good condition with no holes or loose points? YES NO

If your dog will have free access to a fenced yard, where is it located?

front yard back yard side yard

Which of the following is used to secure your gate?

latch padlock

keyed lock other: _____

We do not lock our gate for the following reason: _____

If your gate does not have a lock, are you willing to install one? YES NO

Who has access to your yard? (check all that apply)

Gardner Housekeeper

Pool man Delivery

Utility Neighbor

Postal worker Other: _____

If yes, where is the dog kept while they are working? _____

Do you trust your workers not to let the dog get out? YES NO

Your Experience with Dogs.....

How would you describe your dog owning experience?

I have had dogs of my own as an adult

I grew up with dogs or have worked with them but have not had my own as an adult

I have never had one or have limited experience with dogs

Other: _____

Have you owned a pit bull/ bully breed before? YES NO

If no, what is your experience with them? _____

What do you appreciate about this breed? _____

Are you aware of the dog-aggression issues that may be present in this breed?

YES NO

How are you prepared to address this should it arise? Please be specific: _____

How many dogs have you owned in the past 5 years? _____

What happened to the other dog(s)? _____

Do you currently have pets? YES NO If yes, please complete the following:

Type Breed Gender Age Spay/Neutered? If not, why?

How do you feel your current pets will adjust to a new dog in the house? _____

Have you had experience with behavioral or medical issues with your previous or current pets?

If yes, please describe: _____

If there are children in the household, please describe their experience with dogs:

About this dog.....

Why do you want to adopt a rescued pit bull/bully breed? _____

Share your reasons for wanting a dog? (check all that apply)

family pet gift for someone else protection/guard dog

companion child's companion companion for another pet

Other: _____

How will you exercise your dog? _____ How often? _____

What type of training are you interested in doing with your pit bull? _____

Have you or would you be willing to enroll your current dog(s) in obedience classes?

YES NO only if I had problems

How would you discipline your dog if he or she misbehaved/ chewed household items? _____

What method do you intend to use to houstrain your dog? (check all that apply)

Rub nose in offending spot take out every couple of hours

Crate training Consult professional

Other: _____

If your pit bull develops behavioral problems, what will you do? _____

In which of the following situations might you allow your dog off leash?

public park dog park beach

hike neighborhood walk

back yard front yard

Additional information.....

If your dog got out/ was lost, what would you do? _____

What food will you feed the dog? (Specify brand if known)

Dry _____ Canned _____ Other _____

Would you like food recommendations? Yes, please

Pets are an investment of your time and money. Can you afford to provide medical care, grooming, proper diet, shelter, and exercise for your new dog? YES NO

Other concerns: _____

What is your monthly budget for your dog? _____

Who is your veterinarian (name and phone)? _____

If you do not currently have a vet, would you like a referral? Yes, please

If you move, what will you do with your dog? _____

Which of the following reasons might force you to give up your dog? (Check all that apply):

excessive barking/ neighbor complaints aggressive on leash destructive chewing

biting/aggression digging divorce/separation allergies

shedding/ dirty not trainable poor watchdog moving/relocating

house-training problems financial problems growling/nipping at guests

excessive vet bills/chronic illness having a baby nips or bites children

new spouse/ partner doesn't like dogs pets aren't getting along

None of the above

other: _____

Additional comments about why you would like to adopt this particular dog: _____

Is there anything else you would like to share about with us? _____

and finally.....

Please read and initial each statement below:

_____ I understand that a home visit is required prior to final placement.

_____ I understand that a home visit does not guarantee placement.

_____ I agree to provide my own collar, leash and a personal ID tag at the time of completing the adoption contract.

_____ I can give a gift of \$_____ to help offset the costs incurred preparing this dog for adoption. (Inability to make a donation does not disqualify an applicant from consideration.) I understand that any donation or contribution is a gift freely given, not a purchase price for a dog.

We reserve the right to refuse adoption to any applicant for any reason. This questionnaire becomes part of our contract.