



# SHEPPARTON ANIMAL SHELTER



## ANIMAL ADOPTION QUESTIONNAIRE

Date:

### YOUR CONTACT DETAILS

Name

Surname

Address

Suburb

Post Code

Telephone

Mobile

Email

Council of residence

### PET INTEREST

Pet you are interested in:

### YOUR FAMILY

Who are you adopting this pet for?

Myself  Family  Other

Please specify:

Who will be the primary caregiver for this pet?

Me  My partner  My child  Other

Please specify:

How many people live in your home?

Number of children living at home?

Please list ages

Pet allergies in the family:

# ANIMAL ADOPTION QUESTIONNAIRE



## YOUR HOME LIFESTYLE

What type of home do you live in?

Residential
  Farm / acreage
  Apartment
  Townhouse / Unit
  Other Please specify:

Do you?  Own  Rent  Government Housing

Do you have your landlords' permission to have pets?  Yes  No

Do need a local laws permit for more than 2 dogs or cats?  Yes  No

Where will your pet stay?

Mainly indoors
  Indoor enclosure/crate
  Free access (pet door)
  Outdoor enclosure
  Free-roaming
  Tethered / Tied up
  Fenced yard (detail below)
  Garage

Fencing material and height:

Where will your pet sleep at night?  Indoors  Outdoors  Enclosure

What type of shelter will your pet have?

On average, how many hours will you spend with your pet?

Weekdays:  hours Weekends:  hours

On average, how many hours will your pet be alone?

Weekdays:  hours Weekends:  hours

How will you comply with Greater Shepparton's 24 hours cat curfew if you adopt a cat?

## YOUR PETS

Are there other pets CURRENTLY in the household?

| Type (eg: dog, cat) | Breed (eg: Staffy) | Age | Male/Female | Desexed | How long owned? |
|---------------------|--------------------|-----|-------------|---------|-----------------|
|                     |                    |     |             |         |                 |
|                     |                    |     |             |         |                 |
|                     |                    |     |             |         |                 |
|                     |                    |     |             |         |                 |

Have you owned any pets previously?

| Type (eg: dog, cat) | Breed (eg: Staffy) | Age | Male/Female | Desexed | How long owned? |
|---------------------|--------------------|-----|-------------|---------|-----------------|
|                     |                    |     |             |         |                 |
|                     |                    |     |             |         |                 |
|                     |                    |     |             |         |                 |

**Declaration** : I confirm that I have provided the Shepparton Animal Shelter with true and accurate information in my adoption questionnaire.

Adopter name

Adopter signature

# ANIMAL ADOPTION QUESTIONNAIRE



Would you consider adopting an animal with special behavioural or veterinary needs?

- Yes  
  No  
  Unsure

Please note some animals may require behavioural or veterinary consultation prior to going home

Please tell us where you heard about adoptions from the Shepparton Animal Shelter?

- Council website  
  Shepp News  
  Social media  
  Family or friend  
  PetStock  
 Other Please specify:

**Adoption Declaration** : I agree that the Shepparton Animal Shelter staff member has explained the below information to me and I have understood the conditions relating to the adoption.

Adopter name

Adopter signature

## TO BE COMPLETED BY ANIMAL SHELTER STAFF

| Staff name  | Date                  | Adoption approved / Not approved |
|---|-----------------------|----------------------------------|
| <b>Notes</b>  |                       |                                  |
| <br><br><br><br><br><br><br><br><br><br>  |                       |                                  |
| Topics required to be covered before finalising adoption.   |                       | Notes                            |
| ANIMAL ADOPTION BOOKLET   | <input type="radio"/> |                                  |
| GENERAL: Council requirements, Local Laws, Animal Registration, Microchipping, Housing, Fencing/containment, Financial considerations | <input type="radio"/> |                                  |
| MEDICAL: Dietary, Vaccination, worm/flea/heartworm treatments, stitch removal, Common health concerns                                 | <input type="radio"/> |                                  |
| BEHAVIOURAL: Settling into a new home, Introducing to children and pets, House training, Enrichment, Exercise requirements            | <input type="radio"/> |                                  |
| SPECIAL ADOPTION ANIMAL? Behavioural, Medical issues, Relevant handouts provided  | <input type="radio"/> |                                  |
| GUARANTEE: Animal Shelter Health guarantee  | <input type="radio"/> |                                  |