



**SAVING DOBERMANKIND ANIMAL RESCUE ADOPTION APPLICATION
(DOBERMAN PINSCHER)**

Thank you for wanting to adopt a rescued dog! Each applicant is carefully considered to create a match which best suits the dog’s physical and emotional needs with the applicant’s home. Please be fully committed to the training, energy, and love that it will take for your dog to settle in to your home. We will work very hard with you to make the best match and to create a successful bond from the start.

Application Timeline: The rescue does its best to process applications in a timely manner but please be aware that we are completely volunteer run. We will contact personal references and your vet (s) if you have pets currently or have in the last year. After references respond, we will complete a home visit. The average time it takes to process an application is 1-2 weeks.

GENERAL INFORMATION

Applicant 1 Name:	
Address:	
City, State, Zip:	
Home Phone:	
Cell Phone:	
Personal Email:	
Occupation/ Employer:	
Co-Applicant (Spouse, significant other, roommate):	
Relationship to Applicant 1:	
Cell Phone:	
Personal Email:	
Occupation/Employer:	

REFERENCES

Personal references are required. Vet references are required if you currently have pets or have had a pet in the last 3 years. Not giving personal references can result in your application being rejected.

Please provide a veterinary reference. If this is a reference from a past pet, that’s fine

Clinic:	
Veterinarian’s name:	
Phone:	
Email:	

Please list two personal references (not a relative or household member), whom you have known for at least three years, who can vouch for your character as a pet owner. Give name, phone, and email:

Reference 1:		
Name and relationship:		
Phone:		Email:

Reference 2:	
Name and relationship:	
Phone	Email:

LIVING ARRANGEMENT AND CARE QUESTIONNAIRE:

Please list everyone that lives in your household:

Name	Relationship to Applicant	Age	Experience with Dogs

Does everyone in the house want to adopt a Doberman? Yes No

Please list all of the pets in your household. Include both current AND past pets (10 years max)

Name, Species & Breed	Age	Gender	Spay/Neuter?	Temperament	Residing with you?

For any pets no longer residing with you, please tell us why the pet is no longer in your home:

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For current pets:

Has any recent pets or current pets been diagnosed with parvo? Yes No If yes when? _____

Are all of your pets current on vaccines? Yes No

*please note they must be UTD in order for your application to be approved, we will call your vet.

Who will be responsible for the care of a new dog?

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LIFESTYLE & ENVIRONMENT

Please describe your residence & environment

Urban, suburban or rural?	
Do you own or rent?	
<i>If you rent please include the property owner's name and email address so we can contact to get permission for a dog to be living in the home, we will need a letter of approval from your property manager:</i>	
If you rent, has the property owner given you permission to add a dog to your home? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you reside in an HOA? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, we will need verification there isn't any breed restrictions.	

How long have you resided at this location?	
Do you have a fenced yard? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you have a fence please describe: Height: Material: Approximate size of enclosure:	
Does anyone in the home smoke? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If so, what (e.g. tobacco, marijuana) and where (e.g. inside house, outside)?	
Do you have any health concerns or conditions that are currently affecting your ability to care for a dog or may do so in the future? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe:	

The following questions are to help us get an idea of what dog would be a great fit for you. There are no right or wrong answers, so please be as honest and accurate as possible.

Approximately how many hours per day would your dog be alone? How often?

Please describe your typical weekly schedule:

Where will your dog be when alone?

Where will your dog be at night?

If you moved to a place where pets are not allowed, what would you do with your dog?

Will your dog have access to a dog-door? Yes No

How will your dog be exercised?

Do you regularly have children or other guests visit your home? How often do children visit specifically? Will your dog be exposed to children on a regular basis (in parks, playground, home settings).

Do you foresee any major life changes over the next two years? (e.g., promotion/transfer at work, relationship change such as marriage, remodeling your home or yard, having children)?

What physical and personality characteristics are you looking for in a dog (e.g., male/female, energy level, a training project or more of a stable dog with lots of history)? *(the more info we have here, the better)*

What activities do you plan to do with your dog?

Pet <input type="checkbox"/>	Personal Protection <input type="checkbox"/>	Couch Potato <input type="checkbox"/>	Hiking/Walking Partner <input type="checkbox"/>
Obedience <input type="checkbox"/>	Nose Work <input type="checkbox"/>	Agility <input type="checkbox"/>	Other <input type="checkbox"/>

If other please elaborate:

HEALTH

What do/would you spend on the following categories of medical care?

Routine care (please provide a dollar amount you think is reasonable for annual non-emergency care)	
Emergency medical care (a range is fine)	
Other/additional comments about medical care	

Have you ever had a dog with a medical emergency (i.e. accident or bloat) or a long term illness? Please explain: how did you treat the condition; what was the cost; what was the outcome?

TRAINING & BEHAVIOR

We encourage you to tell us whether this is an area where you would like more information about positive only techniques. In attempt to start dialogue, we want to help applicants learn more about nurturing your dog in a positive environment that fosters learning and trust.

Have you ever had a dog with behavior problems? If so, what behavior(s) and how did you work with your dog on this issue?

Would a new dog be crate trained? Yes No Depends on the dog

Will you attend dog obedience classes? Yes No Depends on the dog
(we recommend six months of formal class for each new dog/owner partnership)

Are you prepared for chewing, digging, scratching, housetraining, and/or mischievous behavior? Yes No

How do you plan to correct a new dog if one of the above listed behaviors happens?

Is there anything that would cause you to return a dog? Yes No

If yes, please explain:

Have you ever sold, rehomed, or surrender a dog? Yes No

If so please explain:

Do you have the time, patience, and physical ability to exercise a Doberman? Please list how

SDAR DOGS

Please note our organization is completely run by volunteers who do not get paid a single dime. We operate on donations and adoption fees. Adoption fees cover the spay/neuter, all vaccines, and microchipping of your new loved family member. Fees can also go towards additional medical care, transport of the dogs from high kill shelters to our volunteers, rescue insurance, food, bedding and anything else our rescue dogs need to ensure they are happy and healthy.

Our Adoption Fees:

- \$500 for puppies (up to 6.5 months)
- \$450 for young adults (6.5 months to 2 years)
- \$400 for adults (3 year to 6 years)
- \$350 for seniors (7 years and older - may be reduced depending on the dog)

Dog preference:

Age:

Gender: Male Female No Preference

Color: Black Red Fawn Blue Albino No Preference

Will you consider natural ears? Yes No

Will you consider a natural tail? Yes No

What are the names of the dogs you are interested in applying for?

Do you agree that, as part of the adoption contract, puppies and dogs adopted from SDAR will not be altered in any cosmetic surgical way (to include but not limited to; ear cropping, tail docking)? Yes No

Are you willing to allow a SDAR representative to conduct a home visit, prior to receiving any animal, and at least once after the animal is placed? Yes No

Do you have any additional questions?

- **The information on this questionnaire will be kept confidential.**
- **I certify that all the information provided is complete and correct to the best of my knowledge. I also agree to allow Saving Dobermankind Animal Rescue to contact my vet and obtain my pet's vet records.**

Physical Signature

Date

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Applications can be emailed to: HookedOnDobies@gmail.com

