# Sophia

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## DOG ADOPTION QUESTIONNAIRE

JR Drew & Tommy Plaggemeier are rehoming Sophia privately and in accordance with good advice received from experienced dog owners, various rescues, and the Oregon Humane Society. Per that advice, we hope to make certain that the person(s) who adopts Sophia is aware of the responsibilities of pet guardianship, and is willing, able, and ready to accept those responsibilities morally, physically, and financially.

If you agree that adopting a dog is a commitment for a lifetime, please either 1) fill out this questionnaire or 2) prepare to answer these questions at some point in our conversations. Please, answer only questions you're comfortable answering. Thank you.

DOG OF INTEREST: Sophia a 7-year-old, spayed, female, German Shepherd

PERSONAL INFORMATION

Name: _____

Age *(circle one)* : Under 20 • 20-39 • 40-59 • 60+

Name of *(circle one)* spouse • partner • roommate _____ • I live alone

Street address: _____

City: _____ State: _____ Zip: _____

Cellular phone: _____ Email: _____

Occupation: _____ Spouse's occupation: _____

Work schedule: _____ Spouse's hours: _____

Names of all persons living in your household, their relationship to you and their ages:

_____ _____

_____ _____

Please list two personal references and their relationship to you:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

## YOUR HOME

Type of dwelling? *(circle one)* House • Apt • Condo • Other *(explain)*_____

You *(circle one)* : Own • Rent

If condo, what are the association's rules about pets? _____

Your home has *(circle one)* : 1 story • 2 stories

If you have yard *(circle one)* : Fenced (height: _____ feet) • Unfenced

Does your home have a pool? *(circle one)* Yes • No

If you have a pool, is it fenced? *(circle one)* Yes • No

How do you introduce a dog to the pool? _____

If not a homeowner, do you have the landlord's permission to have a dog? *(circle one)* Yes • No

Landlord's name: _____ Phone: _____

## YOUR COMPANION ANIMALS

Do you presently have a dog? *(circle one)* Yes • No

Have you previously had a dog? *(circle one)* Yes • No

If you presently or previously have had dogs, please complete the tables below. In the column, "what happened," write: gave away, sold him/her, took to the pound, abandoned, died, etc. (If the dog died, please state cause of death.)

**CURRENT DOG(S)**

| Name & Breed | Age | Sex | Altered? | How & Why Obtained? | How Long? |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |

**PREVIOUS DOG(S)**

| Breed | Age | Sex | Altered? | Kept In/Out | What Happened? | What Year? |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |

Have any of your dogs ever had puppies? *(circle one)* Yes • No

If YES, did you breed for: *(circle one)* Fun • Profit • Show • The litter was an accident

Has any member of your family ever experienced animal-related allergies? *(circle one)* Yes • No

Have you ever trained a dog in obedience classes? *(circle one)* Yes • No

Have you ever trained a dog in: *(circle all that apply)* Basic Commands • Herding • Hunting • Guarding/Attack • Other _____

If you have other pets, please complete the following table:

| Species | How many | Age | Kept where? | Since what year? | If cat, declawed? If yes, why? |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

## YOUR FAMILY VETERINARIAN:

Name: _____ Phone: _____

* If you give us permission to contact the veterinarian you've named (above) **and** if you agree with Legal Certification Statement (below), please,

SIGN HERE: _____ DATE: _____

**Legal Certification Statement**

I hereby certify that I am the owner of a pet(s) seen and/or treated by the veterinarian named above. Further, I hereby request and authorize the above-named veterinarian/veterinary practice to release to and/or discuss with JR Drew or Tommy Plaggemeier any requested medical information for my pet(s).

## RE: SOPHIA

Who would be responsible for Sophia's care? _____

What is your primary reason for adopting Sophia? *(circle all that apply)*

Companion • Guard dog • Fighting • Hunting • Attack dog • Other *(explain)*_____

If Companion, whose? *(circle all that apply)* You • Spouse • Children • Other pet • Someone else *(who?)*_____

Where will Sophia sleep? *(circle all that apply)* Inside *(where?)* _____ • Outside *(where?)* _____

How many hours per day will Sophia be alone? _____

Where will Sophia be when she is alone? *(circle all that apply)* Indoors • Outdoors

If outdoors *(circle all that apply)*: Yard • Patio/Balcony • Kennel • Garage • Other *(explain)*_____

If yard, do you have a doggie door? *(circle one)* Yes • No

Do you intend to hire a dog-sitter or take Sophia to a doggie daycare center? *(circle one)* Yes • No

When you are at home, Sophia will mainly be: *(circle one)* Indoors • Outdoors • Other (where?) _____

Which rooms or areas of the home/yard will be off-limits to Sophia? _____

Do you allow dogs on the furniture? *(circle one)* Yes • No • Some *(which?)* _____

If Sophia will be outside at all, what outside space is available for her? *(circle all that apply)*

Yard • Patio • Run • Balcony • Unfenced yard • Other: _____

Any gates you have are: *(circle all that apply)* Latched • Padlocked • Other *(explain)*: _____

How do you plan to handle Sophia's exercise needs? _____

_____

Do you feel obedience training makes a dog a better companion? *(circle one)* Yes • No

If necessary, are you willing to attend obedience classes at your own expense? *(circle one)* Yes • No

Do you travel a great deal? *(circle one)* Yes • No

How often? _____ How long at a time? _____

When you travel, how will you provide for Sophia while you are gone? _____

What provisions would you make for Sophia if you had to move:

Locally? _____ Out of state? _____

To a place with a "no pets allowed" policy? _____

Under what circumstances would you not keep Sophia? *(circle all that apply)*

Divorce • Illness in family • Moving • New baby • New job • Housetraining problem • Chewing • Barking • Digging • Allergy

Shedding too much • She gets too big • She becomes ill • Kids ignore her • Pets don't get along • Not obedient enough •

Other *(explain)* _____ • I would not give her up for any of the above

If Sophia becomes destructive at your home, what will you do? _____

_____

If Sophia has "accidents" at your home, what will you do? _____

_____

If Sophia shows 'separation anxiety,' what will you do? _____

_____

If Sophia becomes aggressive to people and/or other pets, what will you do?

People Aggression: _____

Pet Aggression: _____

If Sophia becomes ill or injured, are you financially prepared to provide the medical care? *(circle one)* Yes • No

If yes, is there a maximum amount you would spend for your dog's medical needs?

Yes ($) _____ Reason: _____

No *(state provision(s))* _____

It's generally understood that 1) life is unpredictable, and 2) at times pets outlive their owners. Therefore, what provisions do you have or will you put in place for Sophia and your other pets, if any, in the event of your disability or death? *(be detailed)* _____

_____

_____

_____

_____

_____

_____

_____

*(cont'd)* _____

Is there anything else you would like to tell us about yourself? _____

By signing below, I affirm that 1) all the information I have provided in this Questionnaire is true and correct, and 2) if any of the information changes, I will advise JR Drew or Tommy Plaggemeier promptly.

Signature: _____ Date: _____

Print Name: _____