

## Preliminary Adoption Form

CAT

This application must be completed by anyone interested in adopting an animal from PAWS. The staff is committed to placing our animals in permanent, responsible homes and at the same time, matches you with a companion who is suitable for you and your lifestyle.

First name:	MI:	Last name:
Current Address:		
City:	State:	Zip code:
Home phone:	Cell:	Work:
Email address		

Driver's License # \_\_\_\_\_

### ABOUT YOUR HOME

1. Do you live in a :  House  Apartment  Mobile home  Condo
2. Do you rent or own?  Own  Rent
3. If you are a renter, does your landlord allow pets? Any restriction?
4. Name and phone number of leasing agent or landlord:
  
5. How long have you lived at this address?
  
6. What would you do if you moved to a residence where cats are not permitted?
  
7. Place of employment and phone number:

### ABOUT YOUR FAMILY

1. How many adults live in the household?  
How many children live in the household?  
Ages of children in household:
  
2. Are all members of your household in agreement about adopting a cat?
  
3. Who will be the primary caregiver?
  
4. Do any members of your household have any allergies to animals?
  
5. For how many hours would this cat be alone during the day?
  
6. In the event of an emergency, who would care for your cat or what arrangements would you make?

## **ABOUT YOUR CURRENT PETS**

Please list the names, ages, breed and how long you have had your current pets

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1. Are they current on all vaccines?
2. What Veterinary practice do you use?
3. If you currently have cats, are they declawed?
4. Are your current pets spayed or neutered?
5. Where are these animals kept?  Indoors only  Mostly indoors/ outside for play and elimination  
 Mostly outdoors/ indoors on occasion  Outdoors only

## **PET HISTORY**

1. Have you had experience of being the primary caregiver to a cat?
2. Have you ever given a pet away, given it to a shelter or rescue group, returned to a breeder or sold it?
3. Have you ever had a pet for a short time and it didn't work out?
4. Have you ever had a pet lost or stolen?
5. Have you ever had an animal die of unknown causes?
6. Have you ever had a cat die of feline leukemia or FIV?
7. Have you ever had an animal die as a result of being hit by a car, hanged, or poisoned?

Please list the pets you have owned in the past 5 years. What happened to them?


## PLANS FOR YOUR NEW PET

1. Will this cat live:  Outdoors only  Mostly indoors/ outdoors for play and elimination  Outdoors mostly/indoors on occasion
2. Where will the cat be when nobody is home?
3. What Veterinary practice do you plan to use?
4. Are you aware that some cats require weeks to even months to adjust to their new home?
5. Are you willing to bring your pet to a veterinarian for yearly exams, and for vaccinations per your vet's recommendations?
6. Are you will/able to pay for emergency care, which could result in a bill of \$200-\$1000 or more?
7. Cats can live anywhere from 10-20 years. Are you able to commit to providing a home for the life of the pet?
8. What circumstances might justify giving the cat up? (Check all that apply)  
 Baby  Divorce  dog not getting along with other pet  Moving  Shedding  
 Allergies  Behavior problems  House soiling/urine marking  Destructive  
 want to travel  too time consuming  children lost interest  
 Deployment  other
9. If your cat exhibits behavioral problems, would you be willing to seek the advice of a PAWS representative?
10. If you become pregnant, who will change the litter box?
11. Cats sometimes make mistakes and soil outside of the litter box. Please briefly explain how you would handle this situation:
12. Would you allow a representative of PAWS to make a home visit to inspect the premises where your adopted pet will be living?  Yes  No
13. I agree to return the animal back to PAWS if I am no longer able to keep him/her. Please initial:

The providing of false information will result in the forfeiture of adoption fees and any animals adopted.

***Applying for an animal does not guarantee an adoption. We reserve the right to refuse any adoption for any reason.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_

Phone # \_\_\_\_\_