



# ADOPTION APPLICATION

Thank you for your interest in adoption! To submit an Adoption Application please download this form, type your answers next to the questions, save your completed form, and email it as an attachment to us at [CavalierRescueAL@gmail.com](mailto:CavalierRescueAL@gmail.com). Please answer every question honestly and completely, leaving no question blank. Feel free to state " N/A " when appropriate. Incomplete applications will not be considered.

Name: \_\_\_\_\_ Spouse/Partner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Best Time to Call: \_\_\_\_\_

Occupation: \_\_\_\_\_ Spouse/Partner's Occupation: \_\_\_\_\_

Do you live in a:

House    Townhouse    Apartment    Condo    Other: \_\_\_\_\_

Do you rent:    Yes    No

If yes, do you have permission from your landlord to keep a dog in the property?    Yes    No

Landlord's Name: \_\_\_\_\_ Landlord's Phone Number: \_\_\_\_\_

Number of Years at Current Address: \_\_\_\_\_ If less than 1 year, what was your previous address?  
\_\_\_\_\_

Do you have a well-maintained and secured fenced yard attached to your home?    Yes    No

If yes, what type of fencing (wood, metal, electric, etc.)? \_\_\_\_\_

If no yard, how do you or will you handle pottying? \_\_\_\_\_

Do you have a dog door with access to outside?    Yes    No

If yes, does the dog have access to outside when not supervised? \_\_\_\_\_

Does your house have a pool or is your property adjacent to the water?    Yes    No

If yes, does the dog have access to the water when not supervised? \_\_\_\_\_

Who resides in the home (list names, ages, relationship to you below)?

Do any individuals smoke inside or outside the home? Yes No

Does your home have interior stairs? Yes No

If yes, what material (hardwood, carpet, etc.)? \_\_\_\_\_

If yes, would you be willing to add carpet treads or runner if requested? Yes No

Are there stairs or steps from the home to access into the yard? Yes No

If yes, how many stairs? \_\_\_\_\_

Are dogs allowed on furniture in your home? Yes No

If no, please describe the furniture or house restrictions below?

Have you owned a Cavalier before? Yes No

If yes, from whom and where was your Cavalier from? \_\_\_\_\_

How did you hear about this breed? \_\_\_\_\_

Do you currently own Cavaliers or dogs of other breeds? Yes No

If yes, list the breed, sex, age and general temperament of the dog(s) below:

If yes, are they all spayed and neutered? Yes No

If not, explain why below?

Does your dog(s) have any behavioral issues? Yes No

If yes, please describe the behaviors and how they are being managed:

What type and brand of food does your dog(s) eat? \_\_\_\_\_

If you do not have a dog, what type and brand would you plan to feed your dog?

How do you or will you walk the dog?

On leash Off leash Do not walk the dog(s)

Have you ever given a pet away or sold a dog to another person, shelter or rescue group? Yes No

If yes, please outline the circumstances:

Please tell us about your history of pet ownership. For each pet, list the breed, length of ownership, cause of death or rehoming of each pet:

Does you currently own pets other than dogs (cats, birds, rabbits, etc.)? Yes No

If yes, please list the type of pet, how many, ages, general temperament of each:

Where would the Cavalier spend the day (be specific)? \_\_\_\_\_

Where would the Cavalier spend the night (be specific)? \_\_\_\_\_

Would you allow the Cavalier to sleep in bed with you or another family member? Yes No

In general, what is your family's typical schedule?

On average, how many hours a day will the Cavalier be home without an adult over the age of 21 present? \_\_\_\_\_

If you are traveling, what arrangements do you make for the care of your dog?

About how often would you be traveling without your dog?

Over 5 trips a year    3-5 trips a year    1-2 trips a year    Never

Veterinarian name, address, and phone number of your current vet or the one you plan to use:

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What are your reasons for wanting a Cavalier and for applying to adopt a rescued Cavalier?

What is your sex preference?

Male    Female    Either

What is your age preference?

Puppy    Under 2 years of age    Under 5 years of age    Under 10 years of age    Any age

Would you be interested in adopting a pair of Cavaliers?    Yes    No

Are you willing to adopt a Cavalier who requires ongoing medication or who has special needs?    Yes    No

Are you willing to adopt a Cavalier who is not aggressive, but is shy, fearful, and requires extra socialization?    Yes    No

Are you willing to adopt a Cavalier who is a senior (age 10 and up)?    Yes    No

Would you be willing to let a representative of the rescue organization visit your home by appointment?    Yes    No

We feel it is an important part of the adoption process for the prospective family to meet and spend some time with the dog before finalizing the adoption and therefore we require that the family travel to the foster home. What states are you able and willing to travel to?

Alabama    Georgia    Texas    Louisiana    Tennessee    California    Missouri    Mississippi

Are you applying to adopt a specific Cavalier?    Yes    No

If yes, please list the Cavalier's name: \_\_\_\_\_

What else would you like us to know about you, your family, your home, and your lifestyle that help us in making a perfect match and assist us in determining if you'd be a great home for a rescued Cavalier?

*In addition to submitting this application, we ask that you submit photos to accompany your application. Photos of your home, yard, fencing, living areas, pets, family, or anything else that gives us further insight into your home, family, and lifestyle are encouraged. Please email these photos as attachments to us at [CavalierRescueAL@gmail.com](mailto:CavalierRescueAL@gmail.com).*