

**\*\*For DDAR Use Only\*\***

Application Status:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Name of Animal(s):	_____	
Age:	_____	Breed: _____
Sex:	_____	Color(s): _____
Fee:	_____	Altered: <input type="checkbox"/> Yes <input type="checkbox"/> No
DDAR Initials:	_____	Date: _____



**DAKOTA'S DREAM**  
ANIMAL RESCUE

P.O. Box 1814 • Winchester, VA 22604

[dakotas.dream@hotmail.com](mailto:dakotas.dream@hotmail.com)

[www.facebook.com/DakotasDreamAnimalRescue](http://www.facebook.com/DakotasDreamAnimalRescue)

## Adoption Application

Up to 24 hour waiting period

We want to ensure the best possible match for both the adopted pet and you. Working together, we will be able to determine if the adoption is in the pet's best interest, and the process ensures that you will find a pet well-suited for your lifestyle. Remember, this is a lifetime commitment. If approved, you will be required to sign a legal contract and, if applicable, a spay/neuter agreement, when adopting your pet. There is also an adoption fee which reimburses Dakota's Dream for any expenses we may have already paid for age appropriate vet care. **Please provide detailed information for all questions.**

To qualify for adoption you must:

- Be at least 21 years of age and have a valid driver's license or State / Federal identification card stating your current address.
- Have the knowledge and consent of a landlord, if applicable
- Be able and willing to spend the time and money necessary to provide proper medical treatment, proper nourishment and care, and training for a pet

**Please note: Dakota's Dream reserves the right to refuse adoption to anyone. Please be advised that we will not adopt to persons who mislead or fail to provide accurate information on this application.**

### Section A: Adoption Information

Type of pet you are interested in (check one):

Cat

Guinea Pig

Rabbit

Rat

*\*\*Please fill out a separate application for each animal type*

Dog

Other: \_\_\_\_\_

Name of pet(s) you are interested in (if applicable): \_\_\_\_\_

Why do you wish to adopt this pet?

Companion for me / my family

Companion for another pet

*(check all that apply)*

To teach children responsibility

I feel sorry for the animal

For breeding

Other (please explain): \_\_\_\_\_

### Section B: Personal Information

Applicant Name: \_\_\_\_\_

Age: \_\_\_\_\_

Co-applicant Name: \_\_\_\_\_

Age: \_\_\_\_\_

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

Home Phone: (      ) \_\_\_\_\_

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

Work Phone: (      ) \_\_\_\_\_

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

Cell Phone: (      ) \_\_\_\_\_

Are you a first time applicant?

Yes

No

Are you personally associated with one of our volunteers?

Yes

If yes, please provide name(s): \_\_\_\_\_

No

How did you find out about Dakota's Dream? (check all that apply)

Facebook

Twitter

Instagram

Petsmart

Petco

Just Cats Clinic

Radio

Website

Previous Adopter

Other: \_\_\_\_\_

### Section C: Employment Information

Are you currently (check all that apply) :

Employed:  Full time     Part time     Student     Other (please explain) :  
 Unemployed     Retired

Applicant employer: \_\_\_\_\_

How long w/ current employer? \_\_\_\_\_

Co-applicant employer: \_\_\_\_\_

How long w/ current employer? \_\_\_\_\_

### Section D: Household Information

How many persons (adult and children) live in your home other than yourself? Please list names and ages: \_\_\_\_\_  
\_\_\_\_\_

Does anyone in your household have allergies? (check all that apply)

No Allergies     Unknown     Cat     Dog  
 Other animals (please list all that apply) : \_\_\_\_\_  
\_\_\_\_\_

Are all members of your household aware of, and in agreement with, this potential adoption?

Yes     No    If no, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long have you been at your current address?

Do you:     Own     Live w/ parents     Live w/ housemates    Do you live in a:     House     Townhouse  
 Rent     Mobile Home     Apartment

Rental agency / Landlord name (if applicable) : \_\_\_\_\_

Landlord phone: (       ) \_\_\_\_\_

If you rent, does your lease allow pets?

Yes     No     Don't know

If yes, how many: \_\_\_\_\_

Would you object to a home visit by one of our volunteers?

Yes     No    If yes, please explain why: \_\_\_\_\_  
\_\_\_\_\_

### Section F: Veterinarian Information

Are you willing to provide regular vet care for the new pet?     Yes     No

What is your estimate of the cost for annual routine vet care for the pet you wish to adopt?    \$ \_\_\_\_\_

Please provide a description of what you consider to be routine vet care: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you believe in spaying and neutering?

Yes     No

Name of veterinarian: \_\_\_\_\_

Phone number: (       ) \_\_\_\_\_

Veterinary Clinic: \_\_\_\_\_

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

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

## Section G: Current and Past Pets

**What pets do you currently have? List all. Exclude fish.**

Pet Name	Type / Breed	M/F	Spayed/Neutered?	Age	Where Obtained?	How long has s/he been in your care?	Indoor/Outdoor?

**Are your pet's vaccinations current?**

- Yes *If no, why not?* \_\_\_\_\_  
 No \_\_\_\_\_

**Have any of your pets been exposed to communicable diseases?**

- Yes *If yes, please explain:* \_\_\_\_\_  
 No \_\_\_\_\_

**Are your pet's current on flea/tick preventative?**

- Yes *If yes, what brand/type (example Frontline topical)?* \_\_\_\_\_  
 No *If no, why not?* \_\_\_\_\_

**For DOGS, heartworm preventative given?**

- Yes *If no, why not?* \_\_\_\_\_  
 No \_\_\_\_\_

**For CATS, have they been tested for Feline Leukemia/FIV?**

- Yes     No     Unknown  
*If yes, the results:*  Negative     FIV +     FeLV +

**Are your pet(s) socialable with other animals?**

- Yes     No     Unknown

**What type of food do you feed?** \_\_\_\_\_

- Free feed     Scheduled

**Please tell us about the animals you have owned in the past, who are no longer with you.**

Pet Name	Type / Breed	M/F	Spayed/Neutered?	Deceased?	Cause (if known) ?	How long was s/he in your care?	If alive, where & why was s/he rehomed?

**Have you ever been guardian to any animals that were:**

*(check all that apply)*

- Killed by moving vehicles?     Yes     No  
 Killed by another pet?     Yes     No  
 Given away?     Yes     No  
 Turned into a shelter/rescue?     Yes     No  
 Lost or stolen?     Yes     No

*Please explain any items answered with a 'yes':*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Section H: Responsibility

**Who will primarily be responsible for the care of the pet?** \_\_\_\_\_

**Is someone home during the day?**

- Yes    *If yes, who?* \_\_\_\_\_  
 No    *How many hours will the pet be alone?* \_\_\_\_\_

*How many hours do you realistically have each day to spend with your new pet?* \_\_\_\_\_

**Section H: Responsibility (cont.)**

**When inside, how do you plan to keep your pet?**

- Free inside home/habitat
- Confined to crate
- Inside a closed room

**If / when outside, how do you plan to keep your pet?**

- Attended
- N/A - Not Outside

**When traveling, where do you plan to keep your pet?**

- Pet sitter
- With family
- Other, please explain: \_\_\_\_\_
- Boarding agency

**What will happen to the pet if you have to move?**

\_\_\_\_\_

**If your pets were to survive you, what would happen to them? Who would take responsibility for them?**

\_\_\_\_\_

**Section I: Animal Care**

**Are you looking for an indoor, outdoor, indoor / outdoor pet?**

- Indoor
- Outdoor
- Both

**If outdoors, how will you monitor your pet? (check all that apply)**

- Leash & regular walks
- Tie out chain
- Free roaming
- Unfenced backyard
- Fenced backyard (type & height): \_\_\_\_\_
- Dog Run
- Deck/balcony
- Screened porch/patio
- Other, explain: \_\_\_\_\_
- Doggie Door
- Invisible Fence
- Outdoor habitat

**How will you introduce your new pet to any existing pets?**

\_\_\_\_\_

**What kind of behaviors do you find unacceptable?**

\_\_\_\_\_

**How do you plan to handle undesirable behaviors?**

\_\_\_\_\_

**Breed specific questions:**

**For CATS, do you believe in declawing?**

- Yes
- No
- Don't know

**Are your cats declawed?**

- Yes
- No
- N/A

*If yes, why:* \_\_\_\_\_

**For SMALL ANIMALS:**

**What type of habitat will you use for your small animal?**

**What type of bedding will your use for your small animal?**

**For DOGS, do you believe in debarking?**

- Yes
- No
- Don't know

**Are you familiar w/ any specific health issues for the type of animal you are interested in adopting?**

- Yes *If yes, please list:* \_\_\_\_\_
- No

**This animal may take several weeks or months to fully adjust to you and your home. How would you ease the adjustment?**

\_\_\_\_\_

**Section L: Commitments**

Because it is very stressful for any animal to go from home to home, we hope to place each one in a caring home for the rest of its life, which could be up to 25 years. Are you prepared to make this commitment?

Yes

No

If you are no longer able to keep the animal you adopt, do you agree that you must return the animal the Dakota's Dream Animal Rescue?

Yes

No

Furthermore, do you agree that if you cannot keep the animal you adopt, you must house the animal until a suitable new permanent home is available or foster home space opens up?

Yes

No

**NOTE: If for any reason the animal needs to be returned, a surrender fee will be applicable after 30 days.**

*Please list any questions you may have for us and/or any comments and explanations that haven't previously been addressed.*

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**Section M: References**

**Please list three (3) responsible references who have known you for several years:**

Name: _____	Phone: ( _____ ) _____	Relationship: _____
Name: _____	Phone: ( _____ ) _____	Relationship: _____
Name: _____	Phone: ( _____ ) _____	Relationship: _____

**By signing, I agree that the above statements are true to the best of my knowledge.**

Signature of Applicant: _____	Date: _____
Signature of Co-Applicant: _____	Date: _____

**Submission Options:**

Fill out application electronically and submit using the "submit application" button. If the "submit application" button does not function: A) save a copy of the completed application to your computer, B) attach it to an email message and C) send it to [dakotas.dream@hotmail.com](mailto:dakotas.dream@hotmail.com). We recommend you print a copy of your completed form and/or save a copy to your computer for your records.

**Adoption Rules:**

Dakota's Dream Animal Rescue is dedicated to the humane treatment of all animals. We have an obligation to not adopt any animal out unless it is going to a responsible home where it will be part of a family's entire life. For that reason, Adoption Rules have been established. Please read the next page carefully for the adoption rules. Your application cannot be reviewed before you have accepted these guidelines.

**All questions must be answered before the application can be accepted for review by a Dakota's Dream Animal Rescue adoption agent.**

# Adoption Rules



1. A responsible adult 21 years of age or older must sign the adoption application and accept full responsibility for the care of the pet.
2. If at any point in time this cat must be relinquished to another individual/organization, it will be done at the discretion of Dakota's Dream.
3. Cats are placed as household pets and not to work as mousers or function as barn cats.
4. All females must be spayed and all males must be neutered.
5. Should an animal be found to be pregnant after adoption, the pregnancy shall be terminated. In the event of a full-term pregnancy, where a veterinarian determines that the pregnancy cannot be safely terminated, the offspring shall be surrendered to Dakota's Dream.
6. All persons living in the household are to be involved in the selection of the pets.
7. Unless there is a pre-approved adoption application on file, there can be up to a 24-hour waiting period, to all the potential adopter to prepare for a new pet and for Dakota's Dream to check on rental status regarding pets (If applicable) and to call the adopter's veterinarian regarding the adopter's current pets.
8. It is strongly recommended, for the well-being and health of the animal, cats remain indoors. Cats are not to be let outside unsupervised. Cats are not to be let outside unless they are spayed or neutered.
9. Declawing requires the surgical removal of the first digit of a cat's toes. It is an extremely painful procedure that can result in unwanted behavior such as biting, aggression, or refusal to use its litter box. Therefore, it is strongly recommended cats not be declawed as there are non-surgical alternatives available.
10. Declawed cats adopted from Dakota's Dream must be indoor cats only.
11. Dakota's Dream reserves the right not to place kittens under six months of age where there are children under the age of six, for the protection of both the child and the animal.
12. No animal will be adopted to anyone with a history of losing, giving away, selling, or having animals injured or killed by moving vehicles.
13. People living in rental housing must have written or verbal permission by the proper authority.
14. Dakota's Dream reserves the right to reclaim the animal if, in its opinion, the animal is not being properly or humanely cared for.
15. Dakota's Dream reserves the right to do a home visit, at its discretion, prior to adopting a cat.

By signing this document, I/We certify the above statements about me and my history with companion animals are true and correct. I/We understand Dakota's Dream reserves the right to refuse any applicant based on its adoption rules and guidelines. Any misrepresentation of fact may result in my/our application being rejected.

**My signature on this document also permits my present or previous Veterinarian or Animal Hospital to release requested information to an Dakota's Dream volunteer/adoption agent regarding my current or previously-owned pets for the purpose of considering my application. I am/We are aware that prior to placement of a pet from Dakota's Dream, my currently-owned pets, for their protection, must be up to date on needed vaccinations including: rabies, distemper shots, and in some cases feline leukemia and feline aids tests.**

**In accordance with § 3.1-796.95:5 Sections B and C and/or C of the Virginia State Code, I/We affirm that I/We have never been convicted of animal cruelty, neglect, or abandonment.**

I/We have read and agree to abide by the above Adoption Rules.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Co-Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>By my signature below, I have completed or provided the following (please check all that apply):</b>	
<i>UAL checked:</i> _____	<i>Received clearance from rental agent/agency:</i> _____
<i>Reviewed entire application:</i> _____	<i>Vet records on adopted cat given to adopter:</i> _____
<i>Signature of adoption agent:</i> _____	<i>Informed adopter of pending shots/medicines:</i> _____
	<i>Date:</i> _____
<i>**For DDAR Representative use only**</i>	