



# Doggy Dog World Rescue Cat Adoption Application

4550 S. Kipling St. # 14  
Littleton, CO 80127

PLEASE PRINT CLEARLY

The following information is requested so that we can assist you in the selection of a new cat. This form and a consultation with an adoption representative are designed to help you find the cat most compatible with your lifestyle. In order to be considered as an adopter you must:

- Be 21 years of age or older.
- Have identification showing your present address.
- Have the knowledge and consent of your landlord.
- Be able and willing to spend the time and money necessary to provide training, medical treatment and proper care for a pet.

***Completion of this application does not guarantee adoption of a cat.***

Name of Applicant: \_\_\_\_\_ Date \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail \_\_\_\_\_ Age: \_\_\_\_\_ Employer \_\_\_\_\_

Work Phone \_\_\_\_\_ Work Address \_\_\_\_\_

Position Held \_\_\_\_\_

Describe in detail the cat you're looking for or PRINT CAT'S NAME here. \_\_\_\_\_

Would this be your first cat? Yes \_\_\_\_\_ No \_\_\_\_\_

What kind of pets have you had in the past? \_\_\_\_\_

Which of these do you still have? (Include age, sex and breed) \_\_\_\_\_

What happened to the ones you no longer have? \_\_\_\_\_

Have they been spayed or neutered? Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_

Are they current on vaccinations? Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_

Have they been tested for Feline Leukemia? Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_

Have they been tested for FIV? Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_

Are they declawed? Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_

If yes, is the cat declawed on: The front paws \_\_\_\_\_ all four paws \_\_\_\_\_

Will you have the cat declawed? Yes \_\_\_\_\_ No \_\_\_\_\_ Maybe \_\_\_\_\_

If you have pets, will they adjust to a new cat in the house? Yes \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_

Why do you want this cat? Companion \_\_\_\_\_ Companion for other pet \_\_\_\_\_ House pet \_\_\_\_\_

Barn cat \_\_\_\_\_ Mouser \_\_\_\_\_ Office cat \_\_\_\_\_ Other \_\_\_\_\_ Explain: \_\_\_\_\_

Do you have a dog door? Yes \_\_\_\_\_ No \_\_\_\_\_

Will you keep your cat in the house? \_\_\_\_\_ Outdoors \_\_\_\_\_ With free access indoors and out \_\_\_\_\_

In the barn? \_\_\_\_\_ Explain: \_\_\_\_\_

How many adults are there in your family? \_\_\_\_\_

How many children? \_\_\_\_\_ Children's ages: \_\_\_\_\_

Does any member of your household have an allergy to cats? \_\_\_\_\_

How many hours each day will the cat be without human companionship? \_\_\_\_\_

Explain: \_\_\_\_\_

Which do you live in? House \_\_\_\_\_ Apartment \_\_\_\_\_ Condo \_\_\_\_\_ Mobile Home \_\_\_\_\_

Other \_\_\_\_\_ If other, explain \_\_\_\_\_

Do you rent or own you home? Own \_\_\_\_\_ Rent \_\_\_\_\_

**If you live in an apartment complex please list the name of the complex as well as the landlord's name, and phone number. For rental properties we check with the landlord to make sure pets are allowed.**

Will you keep that this cat up to date on vaccinations? Yes \_\_\_\_\_ No \_\_\_\_\_

Who is your veterinarian? \_\_\_\_\_

Address and phone number of your veterinarian \_\_\_\_\_

If you go away for a few days, or on a vacation, who will take care of the cat? \_\_\_\_\_

Are you willing to have a representative come see where the cat will be living? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to take the responsibility for this cat for the next ten to twenty years? Yes \_\_\_\_\_ No \_\_\_\_\_

What provisions will you make for the cat should you become unable to care for it? \_\_\_\_\_

Please list two personal references (Not to include relatives or people currently living with you)

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

Home Phone Number: \_\_\_\_\_ Work Phone Number \_\_\_\_\_

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

Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

Comments by applicant:

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

\_\_\_\_\_  
Adopter's Printed Name

\_\_\_\_\_  
Adopter's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Doggy Dog World Representative