



## Adoption Application

**PERSONAL INFORMATION (Please print):**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Cell phone: \_\_\_\_\_ Home phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**HOUSEHOLD INFORMATION:**

**How many people are in your household?**

Adults (including self): \_\_\_\_\_ Children \_\_\_\_\_ Ages: \_\_\_\_\_  Live With  Visit

**Do you live in:** HOUSE APARTMENT **Do you:** OWN RENT LEASE

**If renting/leasing, are there pet restrictions?** YES NO If yes, what are they? \_\_\_\_\_

Landlord's name \_\_\_\_\_ Landlord's phone \_\_\_\_\_

*If renting, we will contact your landlord to ask if having animals in your home is acceptable. You will not be able to adopt until we receive positive confirmation.*

**Please list all of your current pets:**

Dog/Cat	Breed	Name	Age	M/F	Altered?	How long owned?

**Who will be the primary caretaker of your dog?** \_\_\_\_\_

**Describe your yard:**

No yard  Unfenced yard  Partially fenced yard  Completely fenced yard

Height of fence: \_\_\_\_\_ Made of?  Wood  Chain link  Other

Invisible or underground fence system

If you don't have a fenced in yard or exercise area, do you agree to keep your dog on leash at all times while in your yard?  Yes  No

Are you willing to have a DRU representative visit your home before adopting a DRU Doberman?

Yes  No

**Veterinarian Information**

Current or most recent

Veterinarian \_\_\_\_\_

Address \_\_\_\_\_

Phone/Email \_\_\_\_\_

**How would you describe your level of experience with dogs?** *check all that apply*

- Never had a dog
- Had childhood pet dog
- Had one or more as an adult
- Have experience with "power" breeds
- Have experience working with on-going medical problems with a personal dog
- Have experience working at a boarding kennel/resort/pet sitting service etc.,
- Have experience working with behavioral problems with a personal dog
- If you worked with a trainer, what type of training did you do? \_\_\_\_\_
- Have experience working in a veterinary hospital
- Have previous rescue/foster experience, if yes, please describe: \_\_\_\_\_

**Do you have experience with:**  small dogs  medium dogs  large dogs

**List experience with specific breeds:**  
\_\_\_\_\_

**How many hours during the AVERAGE day will this dog spend WITHOUT a human?** \_\_\_\_\_

Where will this dog be when someone is home? \_\_\_\_\_

Where will this dog be when alone? \_\_\_\_\_ Where will this dog sleep at night? \_\_\_\_\_

Are you willing to crate?  Yes  No

**What situations do you feel prepared for?**

- Excessive barking
- Destructive chewing
- Not housetrained
- Digging
- Escaping
- Resource (food/toy) aggression
- Shy, fearful, or undersocialized dog
- Not good with children
- Not good with other dogs
- Not good with small animals/cats
- Biting
- Administering medications
- Providing on-going formal training
- Very high activity level
- Deaf/Blind dogs

Are you willing to work with our trainer or one recommended by DRU on any issues that may arise?

Yes  No

Please tell us anything else you would like us to know to help match you up with the right Doberman:

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\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date