

Rat Adoption Application

Rat Name _____

Humane Society of Jefferson County, Inc.



Application Procedure

We request the following information in an attempt to assist you with the selection of your companion animal. The animal’s welfare is our foremost consideration. This process is designed to help us determine if the placement is in the animal’s best interest and to assist you in finding an animal best suited to your lifestyle. H.S.J.C. reserves the right to refuse an adoption to anyone for any reason. No animal will be adopted to prospective owners who mislead or fail to provide accurate information on this application. You must be 18 years or older to adopt.

Please read the following information carefully.

1. Fill out the application completely. Identification is required to verify information.
2. We do not do same day adoptions.
3. Every effort will be made to review the application in a timely manner. HSJC staff will notify you when the process has been completed and inform you of our decision.
4. Once an application has been approved it will remain on file for 6 months.
5. All family members must meet the new companion animal before adoption to ensure compatibility.

Name: _____ **Phone:** _____ **Date:** _____

Birth date: _____ **Address:** _____

City _____ **State:** _____ **Zip:** _____ **County** _____

Email address: _____

How long have you lived at this address? _____

Pre-approve (pet selection not yet made) **Yes** / **No**

Type of residence

Circle one: House Apartment Duplex Mobile Home Farm

Live with friend/relative Condo Other _____

If you rent, lease or own a condo or trailer please provide the following information:

Landlord or Condo association: _____

Daytime phone: _____ Evening phone: _____

Are you planning to move within the next 6 months? _____

Veterinary Information(for owned and previously owned pets)

Clinic name: _____ Phone: _____

If you do not currently have a veterinarian, you will be asked to obtain one before the adoption is finalized.

Please list the pets you currently own and pets you have owned in the past 5 years:

| <u>Species</u> | <u>Name</u> | <u>Age</u> | <u>Spayed or Neutered?</u> | <u>Still own?</u> |
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Are the pets you now own current on vaccinations? Yes / No

Are vaccination records under name listed on application? Yes / No

If you no longer own the pet, what happened to it?

Have you ever adopted from a shelter before? Yes / No When? _____

What kind of pet? _____

Have you ever surrendered an animal to a shelter or rehomed an animal? Yes / No

When? _____ Why? _____

What is your past experience with rats? Please circle.

First time owner

Current rat owner

Had a rat in the past

How much \$ do you plan to spend per year to care for your rat? _____

How many hours a day will your rat be without human companionship? _____

Are you a frequent traveler? Yes / No

Who will care for your rat while you are away? _____

Where will you keep the rat during the day / night? _____

How will you provide time for exercise? _____

What size housing will you provide for your new rat? _____

Are you willing and able to assume the financial responsibilities of pet ownership? Yes / No

Are you prepared to commit to caring for your new rat for the next 2-4 years? Yes / No

If you must move from your current place of residence what will you do with your rat?

Will you allow your rat adequate time to adjust to a new home? Yes / No

How long? _____

Please tell us a little about your household

What is the activity level of your household? Please circle.

Quiet Active Moderate activity

of Children and ages _____ Adults _____

Who will be the primary caretaker? _____

This rat is being adopted as: Please circle all that apply.

Companion Gift For a Child

Companion for another rat Breeding

Does anyone residing in the house have any known pet allergies? Yes / No

Do you plan to allow your rat outdoors unattended? Yes / No

Are you aware of routine vet care recommended for rats? Yes / No

Circle items you would like more information about.

Rat / Rat Introductions Spaying / neutering

Rats and Children Proper diet

How did you learn about our organization? Please circle.

Pets of the Week Friend/Relative Phone Book Veterinarian

Radio Special Event Other _____

Release:

I certify that I am at least 18 years of age and have provided truthful and accurate information on this application. I give my consent for the Humane Society of Jefferson County to verify this information. **I also authorize my veterinarian to release any information requested by the Humane Society of Jefferson County.** I understand that animals will not be adopted to prospective owners who mislead or fail to provide accurate information. I understand that the HSJC has the right to deny my application. If this animal becomes ill, I certify that I am financially prepared to treat this animal at my own expense. The HSJC is not liable for any animal, or its actions, after the animal has been placed in its approved home.

Signature: _____ **Date:** _____

Received: Staff Initials _____ **Date/Time:** _____

Office Use Only

Veterinary check _____ *Landlord approval* _____

Home ownership verified _____ *Pets licensed* _____

Approved _____ *Denied* _____ *Pending* _____

Adopter notified _____

Notes:

Include all correspondence relating to adoption. Please date and initial.
