Thank you for your interest in Denver Samoyed Rescue. Before filling out this application, please take some time to think about the following questions. This may help determine whether a Samoyed is the right breed for you. These questions address some of the reasons Samoyeds end up in rescue.

| * Why do you want a Samoyed?
* Are you a compulsive cleaner? Master gardener?
* How do you feel about hair on your clothing, furniture, etc.?
* Who will groom the dog?
* Who will scoop up after the dog?
* Will the dog participate in family outings and activities?
* Are you away from home a lot both day and night?
 | * Are you willing to spend time retraining a dog?
* Would having a baby make you decide you no longer need or have time for a dog?
* If you have children, how do you plan to keep your dog from getting out the door or gate?
* Do you prefer a calm, quiet greeting when you come home over a boisterous, enthusiastic greeting?
 |
| --- | --- |

To ensure the best possible placement of our rescued dogs, and that the proposed adoption is in the best interest of all parties, please complete each of the following sections. An incomplete application or misrepresentation of any facts on this application is grounds for refusal. If you have any questions or concerns, please feel free to discuss them with a DSR volunteer (303-453-1360).

**Part I – Household/Family**

| Name(s): |       |  | Date |       |
| --- | --- | --- | --- | --- |
| Address: |       |  | City |       |  | State |       |  | Zip+4 |       |
| How long at current address? |       |
| Telephone Number(s): |  | Home |       |  | Work |       |  | Fax |       |
| E-Mail Address(es): |       |
| Who is your employer? |       |
| Occupation: |       |
| Spouse’s employer: |       |
| Occupation: |       |
| Ages of children living in, or frequently visiting, your household: |       |

**Part II – Residence**

| What type of area do you live in? | ☐City | ☐Suburb | ☐Rural |
| --- | --- | --- | --- |
| What type of housing? | ☐Apt. | ☐Condo | ☐Duplex | ☐House | ☐Other |       |
| Do you live in a covenant-controlled community/subdivision? | ☐Yes | ☐No |
|  If so, are you aware of any restrictions and/or regulations concerning pet ownership? | ☐Yes | ☐No |
|  If yes, what are they? |  |
| Do you rent or own your home? | ☐Own | ☐Rent |
| If you rent or lease, do you have permission from your landlord: |
|  To own a dog? | ☐Yes | ☐No | If yes, are there any weight/size restrictions? Please state. |  |
|  To own a Samoyed? | ☐Yes | ☐No |
| May we contact your landlord? | ☐Yes | ☐No |
| Landlord’s phone number: |       |
| Landlord’s address: |       |
| Do you have a fenced yard? | ☐Yes | ☐No | Height of Fence |       |
|  Type of fence: | ☐Chain Link | ☐Wood | ☐Other/describe: |       |

**Note: Invisible fences are not considered appropriate for Samoyeds.**

**Part III – Current/Previous Pets**

| Have you, or anyone living in your household ever owned a Samoyed? | ☐Yes | ☐No |
| --- | --- | --- |
| What dogs/pets have you previously owned? | Type(s)  |       |
| Why are they no longer living with you? |       |
| Please list all other animals currently living in your home. | Type:  |       |
| Age:  |       |
| Gender:  |       |
| Please describe your child(ren)’s previous experience with dogs: |       |

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

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**Part IV – Rescue Samoyeds**

| How have you educated yourself about Samoyeds? | ☐Books | ☐Internet | ☐People | Please explain below: |
| --- | --- | --- | --- | --- |
|       |
| Why do you want one? |       |
|       |
| How did you hear about Denver Samoyed Rescue and who referred you to us? |       |
|       |
| Do you have any preference to the sex of the dog? | ☐Male | ☐Female | ☐Either |
|  If so, why? |       |
| Do you have an age preference? |       |
| Would you consider a dog that is not exactly your preference? | ☐Yes | ☐No |
| Would you consider a dog with special needs (e.g., medication, weight loss, mobility issues)? | ☐Yes | ☐No |
| If you don’t have a fenced yard, where and how will the dog be exercised and be allowed to eliminate? |       |
|       |
| Which member of your family will be taking the major responsibility for caring for your samoyed? |       |
| What are your plans and goals for this dog? |       |
| Have you ever trained a dog in obedience classes? | ☐Yes | ☐No |
| Will you take your Samoyed to obedience classes? | ☐Yes | ☐No |
| Will the dog live ***in*** your home? | ☐Yes | ☐No |
| Where ***exactly*** will the dog sleep at night and be kept when there is no one at home? |       |
|       |
| How will you handle the grooming needs for your Samoyed? Regular grooming is an essential part of the health care of your Samoyed. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_      |
| What will you do if… |
| … your rescue dog has an accident on your rug or chews one of your favorite items? |       |
|       |
| … your dog digs holes in your lawn? |       |
|       |
| … your dog yaps a lot when he is outside? |       |
|       |
| … a member of your family develops allergies to the dog? |       |
|       |
| … your dog gets loose? |       |
|       |
| Would you use a kennel/crate for behavior control or modification (e.g., separation anxiety, destruction of property, providing a safe den-like area, etc.) if properly instructed in the technique? | ☐Yes | ☐No |
|  If no, why? |       |
| What are the major activities, hobbies, or exercises you and your family participate in? |       |
|       |
| If you move, what will you do with your dog? |       |
| When you go on vacation, what will you do with the dog and who will care for it? |       |
|       |
| Are you prepared to provide a loving/caring home for the duration of this dog’s life? On average they live to be ~12 to 15 years. | ☐Yes | ☐No |

**Part IV – References**

| Who is the veterinarian that you currently use? How long since your last visit to this vet?  |  |
| --- | --- |
|  Veterinarian’s name/clinic: |       |
|  Veterinarian’s address: |       |
|  Veterinarian’s phone: |       |
| Do you mind if we call your vet clinic to ask their opinion about how you take care of your animals? | ☐Yes | ☐No |
|  If yes, why? |       |
| How will your dog travel to the vet or other places? (car, back of pickup, etc.) |       |
| Is there a neighbor we can contact as a reference? | ☐Yes | ☐No |
| Name and phone numbers: |       |
| If you do not have a vet who is familiar with you, please list two non-relatives, and their evening phone numbers, whom we can contact about you. |
|       |
|       |
| Have you ever surrendered a pet of yours to an animal shelter or sold or given one away? | ☐Yes | ☐No |
|  If yes, why? |       |
| May we visit your home to verify the information you have provided? | ☐Yes | ☐No |
|  If no, why? |       |

**Part V – Brief Biography**

| In the space below, please tell us a little about yourself and why you feel you could provide a good home for a rescue dog. |
| --- |
|       |
|       |
|       |
|  |
|       |

(If there are two responsible adults in the household, both must sign as an applicant.)

I hereby affirm that all of the above information is true and correct. I understand that submission of this application does not necessarily mean that I will be approved to adopt and that DSR reserves the right to refuse any applicant. I authorize you to verify any and all infor-mation set forth in this application and to contact my personal references. (Without your signature we cannot process this application.)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Applicant Signature |  | Date |  | Applicant Signature |  | Date |

**Please note that adoption applications may take ~7-10 business days to process.**

**Applications are retained on file for a period of one year.**

**All families, including previous rescue families, must submit an application prior to adopting a DSR dog.**

**DSR’s Adoption Fee is $350-500 per dog, however, discounts may be made depending on the dog’s age, the dog’s medical condition or when multiple dogs are adopted at the same time.**

Return completed application via one of the following methods:

**U.S. Mail:** Denver Samoyed Rescue **E-mail**: samoyedrescue@msn.com

 205 Ken Pratt Blvd, Ste 102 **Phone:** 303-453-1360 (please leave message)

 PMB122

 Longmont, CO 80501

**Thank you for taking the time to complete this application.**

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*(Do not write below this line)*

Accepted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Interviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_

Rejected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Suitable dog: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: