

# Pet Adoption Application

Animal Rescue of Carroll

1721 East 10th Street

Carroll, IA 51401

712-790-9116

Email: [animalrescueofcarroll@yahoo.com](mailto:animalrescueofcarroll@yahoo.com)

Website: [www.animalrescueofcarroll.org](http://www.animalrescueofcarroll.org)

\* Required

**Failure to fill out the application completely, may result in your application not being considered until we have all of the information. If you are serious about a pet, please fill out all questions completely.**

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1. Which animal are you applying for?

\_\_\_\_\_

2. If this pet is unavailable, would you consider another pet?

*Check all that apply.*

☐ Yes

☐ No

3. Where will this animal be kept? \*

*Check all that apply.*

☐ Inside (Sleeps in the house)

☐ Outside (Sleeps somewhere other than inside house)

4. Your Name: \*

\_\_\_\_\_

5. Your Street Address: \*

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6. City: \*

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7. **State:** \*

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8. **Zip Code:** \*

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9. **Phone number:** \*

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10. **Email Address:** \*

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11. **Your Occupation & Spouse's Occupation** \*

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12. **Please list names and ages of all persons in household:** \*

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13. **Lifestyle:** \*

*Mark only one oval.*

☐

Extremely Active

☐

Moderately Active

☐

Somewhat Active

☐

Not Active

14. **Are you:** \*

*Check all that apply.*

☐

Single

☐

Married

☐

Live with parents

☐

Couple, not married

☐

Military

**15. Describe your residence: \***

*Check all that apply.*

- ☐ House in town
- ☐ House with fenced in yard
- ☐ Acreage
- ☐ Apartment
- ☐ Townhouse

**16. Do you: \***

*Check all that apply.*

- ☐ Own
- ☐ Rent

**17. If you rent, landlord's name and phone number:**

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**18. What is your reason for adopting? \***

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**19. Have you ever owned a pet before? \***

*Check all that apply.*

- ☐ Yes
- ☐ No

**20. Do you have pets now? \***

*Check all that apply.*

- ☐ Yes
- ☐ No

**21. If you own pets now, what kind and how many?**

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22. Name(s) of current pet(s)

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23. If you own pets now, how many are spayed/neutered? \*

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24. If you own pets now, how many are current on shots? \*

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25. Is anyone in the household allergic to animals? If so what kind? \*

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26. Are you aware and prepared to meet the first year's cost of regular preventative veterinary care, food, supplies and training? Could be \$200-\$300 depending on animal. \*

*Check all that apply.*

☐ Yes

☐ No

27. Some rescue pets are untrained and not housebroken. Are you willing to take a pet like this? \*

*Check all that apply.*

☐ Yes

☐ No

28. Name and phone number of your present or past veterinary clinic.

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29. Please provide a personal reference not related to you. Name and phone number needed. \*

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30. What times would be the best for an ARC representative to call for a phone interview or meeting? \*

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31. Are you aware and prepared to allow at least 2 weeks, usually more, for this pet to adjust to your home? \*

*Check all that apply.*

☐ Yes

☐ No

32. Any other comments you would like to us to know when considering your application.

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33. This information WILL NOT be distributed. However, may we share it with other non-profit groups, that we feel may be able to find you a suitable pet? \*

*Check all that apply.*

☐ Yes

☐ No

34. I confirm that I have read the adoption policies, understand them, and agree with them. (Policies can be found on the adoption contract.) \*

*Check all that apply.*

☐ Yes

☐ No

35. I certify that the information I have given is true and authorize investigation into all statements made above. I understand that ARC has the right to refuse any request for adoption. In addition, I give permission to ARC and their associate facilities to share information about me that may be obtained during interviews, reference checks and home visits with other humane organizations. \*

*Check all that apply.*

☐ Yes

☐ No

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