

RSPCA Leeds and Wakefield District Branch Moor Knoll Lane East Ardsley Wakefield

WF3 2DX Tel: 0113 253 6952 Charity no: 232223

DOG ADOPTION APPLICATION FORM

About You:	Date Completed: / /				
Mr/Mrs/Miss/Ms (<i>Please delete as appropriate</i>) Name:					
Postcode (in fu	III):				
Home No: Mobile No: Email:					
Please complete all questions					
About The Dog:					
Which dog/dogs are you interested in adopting?					
What behaviours would you find unacceptable, even for a short time? .					
Are you fully aware of the cost of keeping a dog? YES / NO					
Are you aware that all dogs require annual boosters after adoption to maintain immunity to the diseases covered? YES / NO (upon adoption you are agreeing to keep up with annual boosters as part of the adoption)					
(If adopting a puppy) Are you willing to keep in the house/garden until f	fully vaccinated? YES / NO				
PLEASE NOTE: It is the law (as of April 2016) that all dogs MUST be microchip	ped and have a valid ID tag at all times.				
Your Animal Experience:					
Have you ever owned an animal before, either on your own or with pare breed/size and what happened to them? (e.g. died, given away and at					
Please give details of any current animals in the home, including name or not the animal is vaccinated	e, age, species, breed and whether				
Please note if you are looking to adopt another dog, your current dog must be up to date we view of the vaccination certificate will be required at the home visit and at adoption.	vith vaccines.				
Which vets do you plan to use, or have you used in the past?					
About your home, work and family:					
Please give details of your home. Is it a: House / Flat / Bungalow /Oth	ner (specify)				

Is your home **Owned / Council / housing association / Privately rented (we will need to see written confirmation from the landlord/council before the dog can be adopted)**

Do you have a: Private Garde	n / Yard / None	Is the garden secure?	YES / NO (delete as ap	propriate)
What is the type and approxim	ate height of the fe	encing, including at the I	owest point?	
Some dogs may require higher make improvements to secure				
Are there any children under 1 further details on how often, th	eir age, and wheth	• • •	nals	· ·
Has anyone in the house ever	suffered from an a	llergic/respiratory reacti	on to animal fur?	YES / NO
Do you work: Full-time / Part to from home)		•	•	•
How many hours, approximate	ly, a day will the do	og be left alone?		
Please give details of where th	e dog will be kept	when you are out:		
Who will look after your dog(s)	when you go on h	oliday?		
How much exercise can you gi	ve the dog each da	ay? 1hr / 2hrs / 3hrs / 4	Ihrs / 4hrs+ (Delete as	appropriate)
Are you willing to attend training	g classes of any s	ort with the dog?	YES / NO	
Do you have any holidays boo	ked in the near futu	ure? If yes, provide deta	ils;	
PLEASE NOTE: There is a non-rethe dog as much as possible during transition into their new home.	•	•		•
Where did you hear about us (by other establishment / Just p	•	ertisement / Already aw		
General Data Protection Regulations Are you happy to be contacted by us in the future?	How we can contact We will share your per parties specified by y adoption, sponsorshi	t you and how information ersonal information within the ou, only for the legitimate pup, enabling home or vet visits ent sign up or agreement by you	about you will be used branch team or designated rposes of the arrangement so, contact with fosterers, room	3 rd such as m/off
The types of data which we may hold & process: Name & address Email address & tel numbers	We would like to send	d you information about the b SMS. If you agree to being o		
How long we will hold the data: The RSPCA specify how long data should be held on file & it varies according to the type of information. Data will not be held on file beyond its absolute necessity or to comply with statutory regulations	at any time, complair request to see what of If you need any furthe	Email Photol & access their personal data to a supervisory authority about themer information, please write to District Branch, Animal Centre	ta and can withdraw their co bout the use of their data and i. o the Data Controller at RSP	d PCA

FOR OFFICE USE ONLY					
Interviewed By:		Date:			
Comments:					
Date passed for Home Visit:		Date Home Visit passed:			
Ledger No:		Name:			
Colour:	Type:	Sex:	Age:		
Date Last wormed:		Date last Flead:			
Date spay/cast was done:		Date spay/cast to do:			
Date of first vaccine:		Date of second vaccine:			
Date done of health check to go:		Date of Adoption:			