

# S.O.L.A.S. Adoption Application

EIN 42-1442648

## PERSONAL INFORMATION

Name of Applicant \_\_\_\_\_

Name of Co-Applicant (adults over 18 yrs. only) \_\_\_\_\_

Relationship to Application (Circle One) Spouse Significant Other Roommate Other

Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone: Home ( ) \_\_\_\_\_ Work/Cell ( ) \_\_\_\_\_

Email \_\_\_\_\_ Job Title \_\_\_\_\_

Applicant's Employer \_\_\_\_\_

How did you hear about S.O.L.A.S.? \_\_\_\_\_

1. Why do you want to adopt this animal? (Circle Choice)  
Companion Gift For a Child Other (Explain) \_\_\_\_\_

2. Do you live in a: (Circle One) House Townhouse Apartment Duplex

3. Do you: (Circle One) Own or Rent

4. Will your pet be an indoor cat only? (Circle One) Yes No

5. How many adults in your household? \_\_\_ Ages \_\_\_\_\_ Children? \_\_\_ Ages \_\_\_\_\_

6. Who will be responsible for the care of this animal? \_\_\_\_\_

7. Where will the pet be kept during the day? \_\_\_\_\_

At night? \_\_\_\_\_

8. Is there anyone home during the day? \_\_\_\_\_ Who? \_\_\_\_\_

9. How many hours a day will the pet be alone? \_\_\_\_\_

10. Who will care for the pet when you are on vacation? \_\_\_\_\_

11. Are you willing to take responsibility for this pet for the next ten or more years? \_\_\_\_\_

12. How much do you think it will cost to take care of this pet each year? Please consider the cost of veterinary care, food, grooming, toys, licensing, etc. \_\_\_\_\_

13. If you currently have pets, are all vaccinations current? (Circle One) Yes No

14. Please list all the pets you have owned in the last five years (use additional sheet if necessary)

<b>TYPE</b>	<b>SEX</b>	<b>AGE</b>	<b>SPAYED/NEUTERED ?</b>	<b>WHERE IS HE/SHE NOW?</b>

15. Why should S.O.L.A.S. place a companion animal with you?

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### **APPLICANT REFERENCES**

If you currently own or have owned a pet during the past three years, one reference must be a veterinarian. Other references may include neighbors or co-workers. If you rent, please list landlord.

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Name / Relationship / Phone No.

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Name / Relationship / Phone No.

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Name / Relationship / Phone No.

**Have you ever been charged with or convicted of Animal Neglect or Animal Abuse?**

**Yes**

**No**

### **APPLICANT SIGNATURE(S)**

I acknowledge that the information contained in this form is true and correct to the best of my knowledge. I understand that any misrepresentations of fact may result in the removal of the adopted animal from my home. The adoption donation is non-refundable.

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Signature of Applicant (must be at least 18 yrs)

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Date

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Signature of Applicant (must be at least 18 yrs)

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Date