



Pre-Adoption Questionnaire

The Escondido Humane Society

3450 East Valley Parkway
Escondido, CA 92027
(760)888-2247

Thank you for considering a pet from the Escondido Humane Society. We ask that you provide us with the following information so that we may ensure an appropriate match between you and a potential pet. A pet that is suitable for you, your family, your home and your lifestyle. The decisions our adoptions counselors make are based on the best interest of animals in our care and are aimed at finding **permanent** homes for these pets.

Please be aware that not all adoption applications are accepted at this facility.

Name: _____
Address: _____
City, State, Zip: _____
Email Address: _____



Home Phone: _____
Work Phone: _____
Cell Phone: _____

Household Information:

This will be my: 1st pet 2nd pet 3rd pet or more

What is your or your family, primary reason for adopting this pet?

A Family Companion A companion for another pet
 For Protection For Children A gift Other: _____

Have you ever relinquished a pet to a shelter or given a pet away?

Yes No If yes please provide a brief explanation below:

Are you active Military? Yes No

Are you over the age of 18? Yes No

Are there children in the household? Yes No

If yes what are their ages? _____

Do any members of your family have allergies to specific animals?

Yes No

If you move will you take this pet with you?

Yes No

Would you be willing to agree to a home/yard inspection?

Yes No

If adopting a cat, do you intend to declaw it?

Yes No

What problems would make you return an animal?

Barking Chewing Housebreaking
 Digging Shyness/fear Other: _____

I Would Like To Adopt A:

Dog **Name:** _____
 Cat **Animal ID:** _____

Will this pet be primarily...

Indoors **Or** Outdoors

Where will your new pet be when you **ARE** home?

Where will your new pet be when you **ARE NOT** home?

How many hours will this pet be left alone?

Housing Verification:

Do you live in a...

House Apartment Mobile Home
 Condo/Townhouse Other: _____

Do you...

Own Rent

If Renting-Landlords Name & Phone #:

Do you live...

With Parents With Roommate
 In Military Housing Other: _____

Pets Now Living in Your Home:

Type/Breed	Age	Sex	Altered?	Indoor/Outdoor?
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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