



## PRE-ADOPTION QUESTIONNAIRE

Thank you for your answers. This questionnaire will take 15-20 minutes to complete, all questions must be answered and help us to assess the suitability of the animal for you.

### **A) To be completed by the potential adopter:**

Name of the adopter \_\_\_\_\_

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

Postal Code: \_\_\_\_\_

City: \_\_\_\_\_

CC/Passp: \_\_\_\_\_

NIF: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Where will the animal live: ( ) same as above ( ) other, which?

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## **B) Questionnaire:**

1. Animal you wish to adopt:

Species: ( ) dog ( ) cat

Sex: ( ) male ( ) female

Size: ( ) mini ( ) small ( ) medium ( ) big ( ) giant

2. How many animals do you have (species and number):

3. Are they sterilised/castrated?

If not, why?

4. If you have any more animals at home, is there enough room to prevent territorial fights?

5. How will the introduction to the pack be?

6. Why do you want to adopt an animal?

7. Number of adults in the household

8. Number of children in the house and ages

9. Do you live in a house, apartment, mobile home, other?

Number of rooms in the property

Owned \_\_\_\_\_ Rented \_\_\_\_\_

If you live in a house, is the garden fenced, thus not allowing the animal to get out, but allowing for him/her to stay in the garden, never on a chain or cubicle?

10. Will the animal have access to the inside of your house?

11. Where will the animal sleep?

12. Does everyone in the household agree with the adoption? If not, why?

13. Anyone in the household allergic to fur or anyone who does not like animals?

14. How much do you think you will spend a month to take care of the animal?

Is that amount available in your budget?

15. Food you are going to give to this animal:

Dry food \_\_\_\_\_

Human food \_\_\_\_\_

Both \_\_\_\_\_

Wet food \_\_\_\_\_

BARF \_\_\_\_\_

Raw \_\_\_\_\_

16. Where will the animal stay (check below):

Garden \_\_\_

Covered area \_\_\_

Kennel \_\_\_

Inside of the house \_\_\_

Other \_\_\_\_\_

17. What will the living conditions be? (check below):

Lose all the time (24h) \_\_\_\_\_

Not lose during the day and lose at night \_\_\_\_\_

Not lose for part of the day \_\_\_\_\_

Not lose the whole time (24h) \_\_\_\_\_

Other \_\_\_\_\_

If not lose, check how:

chained \_\_\_\_\_ enclosed area \_\_\_\_\_ kennel \_\_\_\_\_

18. Will the animal have:

room to play \_\_\_\_\_

toys \_\_\_\_\_

shelter \_\_\_\_\_

walks with someone \_\_\_\_\_

walks alone \_\_\_\_\_

company of another animal \_\_\_\_\_

human company the whole day \_\_\_\_\_

human company part of the day \_\_\_\_\_

no human company \_\_\_\_\_

no company of another animal \_\_\_\_\_

19. What will you do with the animal when you travel?

20. Will the animal travel with you?

21. What will you do if the animal runs off or gets lost?

22. What will you do if you can't have the animal any longer?

What will happen to the animal if you should die? Is there allowance for the animal in your testament/will and if so, what is the allowance terms e.g. the animal will be euthanized on my death.

23. How many animals have you had before (species and number)?

What happened to them (check below):

Gave them up to someone I knew \_\_\_\_\_

gave them to a shelter \_\_\_\_\_

put them on the street \_\_\_\_\_

they ran off \_\_\_\_\_

died\_\_\_\_\_ Reason for deaths: \_\_\_\_\_

24. Do you normally sterilize/castrate your animals? Yes \_\_\_ No \_\_\_

If no, Why not? If yes, at what age?

25 Do you normally vaccinate your animals? Yes \_\_\_ No \_\_\_

If no, Why not?

26. Do you normally microchip your animals? Yes \_\_\_ No \_\_\_

If no, Why not?

27. Do you normally deworm your animals? Yes \_\_\_ No \_\_\_

If no, Why not? How often?

28. Veterinary clinic that you normally use. Will this vet be responsible for treating the new animal?

29. How will you educate the animal knowing he may not learn the first time? What will you do if the animal bites anyone in the family, ruins something in the house or toilets someplace inappropriate? How will you react if the dog barks at night or when there is no one home (and the neighbors complain)?

30. Are you willing to clean pee and poo, take the dog for walks, feed him or her at scheduled times, treat them when they are sick and pay attention and care for them?

31. Will you be able to afford quality food, deworming, vaccination, castration and veterinarian assistance? What will you do if the animal gets sick or has an accident?

32. If any one in the family gets pregnant, will the animal be treated the same way as before the pregnancy?

33. If there is a child in the house, will you teach them that an animal is not a toy, that he or she feels pain and should be respected, avoiding any accidents?

34. What is your position on letting dogs out for a walk on their own?

35. On average, how many hours will the animal be alone in the house? If more than 6 hours, are you willing to enrich the environment with toys, walks before you leave and when you get home and/or hire a petsitter?

36. If he or she runs away, will you be willing to let the Sanctuary know and do anything you need to locate the animal, no matter the costs and the involvement needed?

37. Do you agree to sending information and photos of the animal from time to time, on your own or when requested?

38. If there is any problem, do you agree to return the animal to the Sanctuary. You may not donate the animal to someone else without our approval.

39. Do you agree with a home visit by us so that we can check if you have the adequate conditions to have an animal?

Signed and dated as being true and correct statement by \_\_\_\_\_  
on \_\_\_\_\_

Do you agree with a trial period of one or two weeks so that you are sure this is what you want?

We will respond to your application within 5 working days.

Obrigada  
Management

*Gua Sofie Hadji Antawati F.S.*

Wigglestail Animal Sanctuary  
NIPC 517183129