



SMAM Adoption Application

Providence Animal Care & Control Center

Staff use only Animal Log #: _____ Cage #: _____ Sex: _____

Breed: _____ Color: _____

APPLICATION DOES NOT GUARANTEE ADOPTION Today's Date: _____

Name of Primary Caretaker/Legal Owner: _____

Age: _____ Occupation: _____

Cell Phone: _____ Work Phone: _____

Address Where Pet Will Reside: _____

City: _____ State: _____ Zip Code: _____

1. Please list everyone who will live with, care for, or frequently visit this small animal(s):

Name	Relation	Age	Will live with the animal?	Will visit the animal?	Will care for the animal?	Has met the animal?

2. Please describe your living situation (please circle):

Single-family home Multi-family home Apartment Condo Duplex Dorm
Homeowner Renter Live with parents

3. How long have you lived at the address above? _____

4. Homeowner/Landlord Name: _____ **Phone:** _____

5. Who are you adopting the small animal(s) for?

6. Is anyone in your home allergic to small animal(s)? Guinea Pigs? Rabbits? Hay? Bedding?

7. Have you owned a small animal before? If yes, please tell us about that.

8. What will you do if you move, or if you can no longer care for this/these animal(s)?

9. Please describe where the small animal(s) will be housed and what they will be eating.

10. Small Animals still require veterinary care. Will you be willing to find a qualified veterinarian and provide your small animal with regular veterinary care?

11. Please describe all animals that this small animal(s) will live with or frequently visit:

Species	Breed	Age	Gender	Spayed / neutered?	Live together?	Frequently visit?

12. Please describe any past pets you have owned:

Breed	Age	Gender	Spayed / neutered?	Years owned?	Where is pet now?

13. List any past veterinarians or veterinary clinics you took your pet(s) to:

14. Please share any additional information you would like us to know about you!

The information I have provided is accurate and true to the best of my knowledge, and I authorize Providence Animal Control to verify any information provided. It is my understanding that false information will result in adoption refusal. I understand Providence Animal Control may refuse any adoption.

Applicant Name (printed)

Applicant Signature

STAFF USE ONLY

Approved By: _____

Date: _____

Denied By: _____

Reason for Denial: _____

Notes: