

Cat Adoption Application

YOU MUST BE AT LEAST 21 YEARS OLD TO APPLY

New Hope Animal Rescue

PO Box 461, Scott Depot, WV 25560
304-562-0300



New Hope Animal Rescue is a non-profit, all volunteer organization established to provide for the rescue, care and placement of animals that have been abandoned, neglected, abused or cannot be kept by their previous owner(s). This application will be reviewed by a member of NHAR and we reserve the right to request additional information, to require certain conditions be met before approving an application, and to conduct a pre- or post-adoption home visit. NHAR also reserves the right to reject any application if it is not in the best interest of the animal.

APPLICATIONS REQUIRE APPROXIMATELY 48 HOURS TO PROCESS

Date of Application

Name

Date of Birth

Address

City

State

Zip Code

Email

Phone

Driver license number

State

Are you employed? Yes No If yes.... Full time or Part time

Place of Employment Work phone

If you are not employed full time, what is your main source of income?

What cat(s) are you interested in adopting?

Name Sex M F Age

Breed Description

What is the primary reason for wanting to adopt this cat/kitten?

Have you ever adopted from NHAR before? Yes No If yes, when?

Where is this animal now?

Please describe the pet(s) you have currently or have had in the past 10 years and tell us what has happened to these pets.

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Who is your Veterinarian? Phone
Are your current pets Spayed/Neutered? Yes No
Are they current on vaccinations? Yes No If no, why?

How many adults live in your home? How many children?
What are the ages of the children in your household?
Do all adults in the household know you plan to adopt this animal? Yes No
Is anyone in your household allergic to cats? Yes No
If yes, how do you plan to handle this problem?
How long have you lived at your current address?
Do you Own your home? Rent your home?
If you rent, what is your landlord's name Phone
Do you have your landlords permission to have a pet? Yes No
If you move, what will you do with your pet?

Who will be primarily responsible for this animal?
How many hours will this pet be alone per day?
Where will this pet be kept during the day?
Where will this pet be kept at night?
If you go away on vacation or in case of emergency, who will care for this pet?

Estimate the MONTHLY cost for the pet you wish to adopt
How many years do you expect to take responsibility for this pet?
How much time will you allow your new pet to adjust to your family and/or current pets?

How will you go about introducing this new animal to your other pets?

Is your present cat declawed? Yes No
Will the adopted cat be declawed? Yes No
If the cat claws your curtains or furniture how will you handle this?

If the new cat cannot get along with your other pet(s) how will you handle this?

Have you ever been convicted of a violent crime or have you ever had a "Protection from Abuse Order" entered against you? Yes No

Please give 2 personal references with phone numbers – not family members or people living with you.

1. Phone
2. Phone

What is the best time to contact you for a telephone interview?
May we make a pre-adoption/post adoption visit to your home? Yes No

Signature of Applicant*

***by placing your name in the signature box, you are certifying that all information on this form is true correct to the best of your knowledge**

Fax to: 304-727-2699 or Email to: newhoperescuewv@gmail.com

Do Not Write Below This Line

This application was received on date/time

This application was reviewed by

Telephone interview date/time

References checked date/time

Home visit date/time

Application was Approved Denied

If denied give reason(s) why

Additional Notes