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# CAT ADOPTION QUESTIONNAIRE

It is our policy to make sure every person who adopts a cat is aware of the responsibility of owning a pet. By completing this questionnaire, you will aid us in determining if you and your family are ready for these responsibilities.

## BASIC INFORMATION

Cat(s) of interest: \_\_\_\_\_ Date: \_\_\_\_\_

## PERSONAL INFORMATION

Adopter's Name: \_\_\_\_\_

Spouse/Partner Name: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

### Housing

Do you rent or own?  Rent  Own

If you rent, provide your landlord's name, address, and phone number.

\_\_\_\_\_

If you rent, do you have permission to get a cat?  Yes  No

Does your landlord require a pet deposit or fee?  Yes  No

### About Your Family

Do you have children?  Yes  No If yes, please list name and age of each child:

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

## GENERAL QUESTIONS

**When and why did you decide to get a cat?**

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**What are you looking for in a cat?**

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**Who will primarily be responsible for taking care of the cat?**

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**If the cat has issues using the litter box, what is your plan?**

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**Who will care for your cat when you are out of town? (Vacation, etc.)**

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**Under what conditions would you have to give up your cat?**

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## GENERAL QUESTIONS

If the cat becomes ill or injured, are you financially prepared to pay for medical care? [ ] Yes [ ] No

What is the maximum amount you would spend on vet care for your cat? \_\_\_\_\_

Would you object to an inspection of your premises by staff? [ ] Yes [ ] No

Are you willing to cooperate with follow-up phone calls and/or home visit? [ ] Yes [ ] No

Do you have any additional comments/concerns: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## VET INFORMATION

Current Vet Clinic Name: \_\_\_\_\_

Veterinarian: \_\_\_\_\_

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

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

Phone #: \_\_\_\_\_

## CURRENT/PREVIOUS PET INFORMATION

Please provide the following information about your current pets:

Animal Name:	Type/Breed:	Age:	Spayed/Neutered:	How long you've had pet:
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\_\_\_\_\_

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\_\_\_\_\_

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If applicable, please provide the following information about pets no longer with you. (Within last 5 years)

Animal Name:	Type/Breed:	Reason:
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## ADOPTION AGREEMENT

- I am prepared to make a lifetime commitment to my cat. (A cat's average lifespan is 13-17 years.)
- I will work with my vet and agree on a regular schedule for wellness visits and other testing my cat needs.
- I am financially able to provide routine and emergency care for my cat . This includes, but is not limited to food, boarding, and regular vet care.
- If, for any reason, I am unable or unwilling to keep this cat, I agree to return the pet and/or work with Almost Home Animal Rescue in re-homing the animal.

## SIGNATURE

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Signature

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Date

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### STAFF USE ONLY:

Match living situation?  Yes  No

Landlord approval?  Yes  No  N/A - Owns home

Vet reference?  Yes  No

Adoption Status?  Approved  Denied

Staff Member Completing Checks: \_\_\_\_\_

Reason: \_\_\_\_\_