



Toller Rescue Inc
Dog Adoption Application Form

www.tollerrescueinc.org

Date of Application: _____

Dog of Interest: _____

Section 1: Applicant Information

Co-Applicant Information

- Full Name: _____
- Date of Birth: _____
- Address: _____
- City/State/ZIP: _____
- Phone Number(s): _____
- Email Address: _____
- Driver License #: _____
- Preferred Contact Method: ☐ Phone ☐ Email
- Best time to contact: _____
- Please provide names and phone numbers of two personal references:

Section 2: Household Information

- Type of Residence: ☐ House ☐ Apartment ☐ Condo ☐ Other
- Do you own or rent? ☐ Own ☐ Rent
 - If renting, landlord's name: _____
 - Do you have landlord's permission to have a dog? ☐ Yes ☐ No
 - Landlord's Phone #: _____ (Phone # must be provided. TRI will require written permission before placement.)
- How long have you lived at this address? _____

- Household members (names, ages, relationship):

- Are all household members aware and supportive of adopting a dog? ☐ Yes ☐ No
- Any household members who may be adversely affected by a dog? ie: allergies, etc. ☐ Yes ☐ No

Section 3: Employment & Lifestyle

- Occupation: _____
- Employer: _____
- Work Schedule (hours per week, typical shifts): _____
- Who will be primarily responsible for the dog's care? _____
- How many hours per day will the dog be left alone? _____
- Where will the dog stay when alone? ☐ Crate ☐ Free roam ☐ Yard ☐ Other
- Do you have a fenced-in yard? ☐ Yes ☐ No If yes, what is the type, height, approximate area:

- Have you reviewed the TRI fencing policy? ☐ Yes ☐ No
- Is your fencing consistent with TRI policy? ☐ Yes ☐ No
- Who will care for this pet while you are on vacation?

Section 4: Pet Experience

- Have you owned dogs before? ☐ Yes ☐ No
 - If yes, please list all of the dogs you've had in the past 5 years (breeds, sex, age, spayed/neutered, where are they now?)

- Do you currently own pets? ☐ Yes ☐ No

- If yes, list species, breeds, ages, and temperament:

- If you have had a pet die due to age, illness, euthanasia, or accident, please give details:

- Have any of your pets ever been treated (ie: been infected with) for heartworms? ☐ Yes ☐ No
- Are all dogs presently living with you on regular heartworm prevention? ☐ Yes ☐ No
- Please list type of medication, how often given, and if not on preventative, please explain:

- Are your current pets spayed/neutered and up to date on vaccinations? ☐ Yes ☐ No

TRI requires all adopted Tollers from TRI be spayed or neutered. Do you have any questions about this policy? ☐ Yes ☐ No

Section 5: Care & Training

- Where will the dog sleep at night? _____
- Do you plan to crate train? ☐ Yes ☐ No
- Are you familiar with the use of a dog crate to train and/or confine the dog in your absence?
☐ Yes ☐ No
- Will your dog be blocked off from certain portions of the house? ☐ Yes ☐ No If yes, please explain: _____
- Will your dog be tied outside? ☐ Yes ☐ No
- Will your dog live in the yard? ☐ Yes ☐ No
- Will you groom the dog yourself or use a groomer? ☐ Self ☐ Groomer ☐ Both
- How will you exercise the dog? ☐ Walks ☐ Yard play ☐ Dog park ☐ Other
- How often will you exercise the dog? _____
- Have you ever participated in obedience training with a dog? ☐ Yes ☐ No
- Would you plan to take part in obedience training with the Toller you adopt from TRI? ☐ Yes ☐ No
- Are you willing to attend obedience classes if needed? ☐ Yes ☐ No
- If you move, what will you do with this pet? _____
- Are you willing to take responsibility for this pet for 10 years, or more, of its life? ☐ Yes ☐ No

- Are you aware of the costs involved in taking care of this pet each year? (Grooming, licensing, food, vet care, treats, toys, obedience, training - \$600-\$800 per year) ☐ Yes ☐ No
- In the event you are unable to care for your rescue Toller in the future, who will accept responsibility for its' care for the balance of its' life?

- Will Toller Rescue be notified? ☐ Yes ☐ No

Section 6: Veterinary Information

- Current veterinarian (name, clinic, phone):
- May we contact your veterinarian for a reference? ☐ Yes ☐ No
- Are you financially prepared for routine and emergency veterinary care? ☐ Yes ☐ No

Section 7: Adoption Preferences

- Desired age range: ☐ Puppy ☐ Young ☐ Adult ☐ Senior
- Desired size: ☐ Small ☐ Medium ☐ Large
- Desired energy level: ☐ Low ☐ Moderate ☐ High
- Preferred Sex: ☐ Male ☐ Female ☐ No preference
- Are you open to special needs dogs? (Ie: blind, deaf, hip dysplasia, etc.) ☐ Yes ☐ No
- Would you consider a senior dog? ☐ Yes ☐ No
- Do you have any special needs or wants? If so, please specify:

- Please feel free to add any other information that you think may be helpful to us in evaluating your application:

Section 8: Commitment & Agreement

Please initial each statement:

- ____ I understand that adopting a dog is a lifelong commitment (10–15+ years).
- ____ I agree to provide proper food, water, shelter, exercise, and veterinary care.
- ____ I will not use the dog for breeding, fighting, or illegal activities.
- ____ I agree to return the dog to the rescue if I can no longer care for it.
- ____ I understand that the rescue may deny my application for any reason.
- ____ I agree that TRI may contact my personal references, landlord, and veterinarian.
- ____ I understand that TRI requires the adoptive family to meet the rescue before adoption. I further understand my rescue of interest may not be local as TRI is a National Rescue Organization; and ALL travel associated costs are at my expense.

Signature: _____

Co Applicant Signature: _____

Date: _____

Thank you for taking the time to complete our application, and for your interest in our program. We will respond to your application as soon as possible. This organization is staffed totally by volunteers; please exercise patience while awaiting a response!

Send your completed application by Email to:

tollerrescueinc@gmail.com

****Submission of Application DOES NOT guarantee adoption of a dog through
Toller Rescue Inc.****