

FOSTER/ADOPTION APPLICATION

German Shepherd Rescue, Inc

Print, fill-out and mail-in or fax to address or fax number at bottom of form.

Your answers on this application will help us to match your needs with the German Shepherd Dogs in our program.

DATE: _____

NAME: _____ AGE OF APPLICANT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: DAY: _____ EVE: _____ EMAIL: _____

Employer _____ How Long _____ Phone _____

Employer _____ How Long _____ Phone _____

Please list TWO references:

Name: _____ Phone _____

Address: _____ City: _____ State: _____

Name: _____ Phone _____

Address: _____ City: _____ State: _____

Do you have a preference?

1. GENDER (Check one)	2. COLOR (Check all that apply)		3. AGE (Check all that apply)	
<input type="checkbox"/> Male	<input type="checkbox"/> Black & Tan/Red	<input type="checkbox"/> White	<input type="checkbox"/> Under 1 year	<input type="checkbox"/> 2 - 4 years
<input type="checkbox"/> Female	<input type="checkbox"/> Black & Silver	<input type="checkbox"/> Sable	<input type="checkbox"/> 1 - 2 years	<input type="checkbox"/> 4 + years
<input type="checkbox"/> No Preference	<input type="checkbox"/> All Black	<input type="checkbox"/> No Preference	<input type="checkbox"/> No Preference	

4. WHAT IS YOUR PRIMARY INTEREST? ADOPTION FOSTER CARE ONLY

IF YOU CHOSE ADOPTION, WHO IS THIS GERMAN SHEPHERD FOR? _____

5. HAVE YOU OWNED A GERMAN SHEPHERD OR ANY DOG BEFORE? (IF YES, PLEASE PROVIDE A BRIEF HISTORY.)

6. WHAT IS IT ABOUT GERMAN SHEPHERD DOGS THAT INTERESTS YOU? _____

7. WHAT OTHER BREEDS, IF ANY, HAVE YOU CONSIDERED? _____

8. WHAT ARE THE 3 MOST IMPORTANT CHARACTERISTICS THAT YOU WOULD LIKE TO SEE IN YOUR NEW GERMAN SHEPHERD?

_____ ACTIVE _____ CALM _____ PLAYFUL _____ INTELLIGENT

_____ LOVING _____ PROTECTIVE _____ AGGRESSIVE _____ DOMINANT

_____ SUBMISSIVE _____ SHY _____ INDEPENDENT _____ OTHER: _____

9. HOW DO YOU PLAN TO DISCIPLINE THE DOG? _____

10. TO FACILITATE THE BONDING PROCESS, WE RECOMMEND THAT EVERY NEW GERMAN SHEPHERD UNDERGO SOME INTRODUCTORY OBEDIENCE TRAINING. WOULD A FORMAL OBEDIENCE-TRAINING PROGRAM INTEREST YOU AS A NEW DOG OWNER? ___ YES ___ NO

11. IT IS IMPORTANT FOR GERMAN SHEPHERD RESCUE DOGS TO BE WELL SOCIALIZED. ARE YOU WILLING TO CONTINUE TO PROPERLY KEEP THE DOG WELL

SOCIALIZED WITH PEOPLE AS WELL AS OTHER DOGS, AND TAKE THE DOG TO GROUP ACTIVITIES TO ENHANCE THEIR SOCIAL SKILLS? _____ YES _____ NO

12. WHICH OF THE FOLLOWING BEST DESCRIBES YOUR CURRENT RESIDENCE?

_____ Own house _____ Own/Rent/Lease Townhouse or apartment

_____ Rent/Lease House _____ Other: _____

(Note: If you rent or lease your residence, proof of permission to have large dogs will be required before the adoption is finalized.)

13. DO YOU HAVE A FENCED YARD? _____ YES (GO TO QUESTION 14) _____ NO (GO TO QUESTION 15)

14. IF YES TO QUESTION 13: TYPE OF FENCE: _____ HEIGHT: _____

CAN CHILDREN EASILY OPEN THE GATES? ___ _____ NUMBER OF GATES: _____

15. IF NO TO QUESTION 13: DO YOU HAVE A SECURE DOG RUN? _____ YES _____ NO

A) WHAT IMPROVEMENTS, IF NECESSARY, WILL YOU MAKE TO SECURE YOUR YARD? _____

16. IF YOU DO NOT HAVE ACCESS TO A FENCED AREA AT YOUR HOME, HOW DO YOU PLAN TO EXERCISE YOUR DOG?

17. HAVE YOU CHECKED YOUR YARD FOR DANGEROUS ARTICLES, PLANTS OR ANYTHING THE DOG COULD USE TO CLIMB THE FENCE? _____ YES _____ NO

18. DO YOU HAVE A POOL? _____ YES _____ NO

IF YES: IS THE POOL FENCED? _____ YES _____ NO

19. DO STRANGERS (METER READERS, ETC.) REQUIRE ACCESS THE AREA YOUR DOG WILL OCCUPY? ___ YES ___ NO

20. ARE THERE ANY DISTRACTIONS (NEIGHBORS' DOG, LOOSE DOGS ON THE STREET, NEIGHBORHOOD CHILDREN) OUTSIDE THE YARD THAT MAY UPSET THE DOG?

21. APPROXIMATELY HOW MANY HOURS EACH DAY WILL YOUR DOG BE ALONE? _____

22. HOW WILL YOUR DOG BE CONFINED WHEN LEFT HOME ALONE? _____

23. WILL THE DOG BE KEPT PRIMARILY INDOORS OR OUTDOORS? _____

24. WHERE WILL THE DOG SLEEP AT NIGHT? _____

25. ARE YOU WILLING TO USE A CRATE FOR THE DOG IF IT IS NECESSARY? _____ YES _____ NO

26. PLEASE LIST ALL THE ANIMALS THAT CURRENTLY LIVE IN YOUR HOME.

Type of Pet

(Dog/Cat/Bird/etc.)	Breed	Age	Sex	Spayed/Neutered/Intact	Kept Where
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27. PLEASE LIST ALL THE PEOPLE THAT CURRENTLY LIVE IN YOUR HOME.

Name

Relation To You

Age

28. WHO WILL HAVE PRIMARY RESPONSIBILITY TO CARE FOR THE DOG? _____

29 DOES ANYONE IN YOUR FAMILY HAVE ALLERGIES TO DOGS? _____ YES _____ NO

30. HAVE YOU AND YOUR FAMILY DISCUSSED THE PROS AND CONS OF OWNING A GERMAN SHEPHERD?
___ YES ___ NO

31. IS EVERYONE IN YOUR FAMILY ENTHUSIASTIC ABOUT GETTING A GERMAN SHEPHERD? _____ YES _____ NO

32. DO FRIENDS, RELATIVES AND CHILDREN HAVE ACCESS TO YOUR HOME, PROPERTY AND CAR WITHOUT YOUR
SUPERVISION? _____ YES _____ NO

33. ARE YOU WILLING TO INSTRUCT YOUR CHILDREN AND OTHER PEOPLE THAT VISIT YOUR HOME
FREQUENTLY ON THE PROPER HANDLING AND CARE OF GERMAN SHEPHERD DOGS? _____ YES _____ NO

34. HAVE YOU CONSIDERED THE LONG COMMITMENT OF TIME AND FINANCIAL RESOURCES FOR DOG
OWNERSHIP? _____ YES _____ NO

35. IS THERE A VETERINARIAN THAT YOU USE NOW OR HAVE USED IN THE PAST? _____ YES _____ NO

IF YES: VET'S NAME: _____ PHONE: (_____) _____

ADDRESS: _____ CITY: _____ STATE: _____

36. IF YOU DO NOT HAVE A VETERINARIAN, WOULD YOU LIKE A RESCUE REPRESENTATIVE TO RECOMMEND A
VETERINARIAN IN YOUR AREA THAT IS ESPECIALLY KNOWLEDGEABLE ABOUT GERMAN SHEPHERD DOGS? _____
YES _____ NO

37. HOW DID YOU FIND OUT ABOUT OUR ORGANIZATION?

___ VETERINARIAN; NAME: _____ ___ FRIEND; NAME: _____

___ SHELTER; NAME: _____ ___ OTHER: _____

___ NEWSPAPER; NAME: _____

39. WOULD YOU CONSIDER VOLUNTEERING FOR OUR ORGANIZATION? _____ YES _____ NO

IF YES, IN WHICH OF THE FOLLOWING AREAS? _____ TEMPORARY FOSTER CARE AS NEEDED

_____ TRANSPORTATION OF ANIMALS _____ TELEPHONE CALLING _____ COMPUTER ASSISTANCE

_____ FUNDRAISING _____ INTERVIEWING ADOPTION CANDIDATES _____ OTHER:

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THANK YOU FOR TAKING THE TIME TO COMPLETE THIS APPLICATION. YOUR ANSWERS WILL PERMIT US TO MORE EFFECTIVELY MATCH YOUR NEEDS WITH DOGS IN OUR PROGRAM.

IF YOU HAVE ANY COMMENTS OR CONCERNS ABOUT ADOPTING A RESCUE GERMAN SHEPHERD DOG OR ABOUT THIS PROGRAM, PLEASE USE A SEPARATE SHEET TO SHARE THEM WITH US. WE ARE ALWAYS INTERESTED AND OPEN TO YOUR VIEWPOINT.

When you have completed this application, please send it to the address below or fax number below:

German Shepherd Rescue, Inc.

P.O. Box 5092

Skokie, IL 60077

(847) 677-0562 - fax

For more information:

(847) 677-0561

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[www.gsdrescue1.org](http://www.gsdrescue1.org)