



Why are you interested in adopting a companion animal? (Check all that apply.)

Gift       For a child       Companion for me       For Protection  
 To breed       Companion for another pet       Replace previous pet      Other: \_\_\_\_\_

Please list all your companion animals, past and present.

Give as much information as possible about each one, starting with your present animals. (Name, Age, Male/Female, Neutered/Spayed, Current on Vaccinations, On Medication (Heartworm, Flea/Tick, Other), Surgical Alterations (i.e. tail docking, ear cropping, declawed))

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Please answer the following questions regarding any cats, past or present, in your home.

Are any cats declawed?       Yes       No  
Are the cats       Indoor?       Outdoor?       Both?  
Are all the cats spayed or neutered?       Yes       No  
Have they been tested for FIV (Feline AIDS) and Feline Leukemia?       Yes       No  
If yes, do any cats have these diseases?       Yes       No  
Are rabies and distemper shots up to date?       Yes       No

Who is, or will be, your veterinarian? (Name, Address, Phone) \_\_\_\_\_

Does EGAPL have permission to contact your vet regarding past or present pets?  Yes       No

What are your beliefs regarding spaying/neutering? \_\_\_\_\_

Would you have your adopted cat/kitten declawed (surgery to remove claws)?  Yes       No       Not Sure

If yes or not sure, circle the following circumstances under which you would need to declaw the cat:

Scratches me      Scratches child      Scratches my other pet      Scratches furniture  
Will be indoors so won't need claws      Better to declaw than risk having cat scratch people/furniture

Other: \_\_\_\_\_

Where will your cat (and any existing cats) spend their days and nights? Select all that apply:

Indoors Only       Outdoors Only       Indoors at night       Outdoors During Day  
 Screened Porch       4-Season Porch       Basement       Single Room  
 Crated       Garage       Barn      Other: \_\_\_\_\_

Which, if any, of the following behaviors/situations present a problem for you? How would you handle them?

- \_\_\_\_\_ Cat scratches furniture or wood \_\_\_\_\_
- \_\_\_\_\_ Cat urinates or defecates outside of litterbox \_\_\_\_\_
- \_\_\_\_\_ Cat scratches/nips you or a family member \_\_\_\_\_
- \_\_\_\_\_ Cat jumps on countertop \_\_\_\_\_
- \_\_\_\_\_ Cat goes outside \_\_\_\_\_

Do you travel a great deal?      Yes      No  
     

If yes, how do you intend to provide for the cat while you are gone? \_\_\_\_\_

Have you adopted from EGAPL or a different rescue group or shelter before?      Yes      No  
     

If yes, which group? \_\_\_\_\_ When? \_\_\_\_\_

Do you still have the animal?      Yes      No      If no, what happened? \_\_\_\_\_  
     

Have you ever surrendered a pet to a shelter or rescue group?      Yes      No  
     

If yes, what were the circumstances? \_\_\_\_\_

Have you ever surrendered a pet to a friend or family member?      Yes      No  
     

If yes, what were the circumstances? \_\_\_\_\_

Have ever had a cat/kitten go missing (ran away, hit by car, attacked by another animal, etc.)      Yes      No  
     

If yes, what were the circumstances? \_\_\_\_\_

**If costs \$800 to keep a cat/kitten for a year. Can you afford this?**      Yes      No  
     

Since many shelters have unknown medical backgrounds, are you prepared to provide and pay for any necessary medical treatment?      Yes      No

**Disclaimer and Signature**

**PLEASE READ CAREFULLY:**

This application is designed to help us determine if the adoption is in the animal's best interest and to assist the potential adopter in finding an animal most compatible with his/her lifestyle. An unwise adoption can result in an unpleasant experience for adoptive families and may have a negative impact on the pet's chances for any further adoptions.

**WE HOPE YOU WILL AGREE THAT THE ANIMAL'S WELFARE MUST BE OUR FOREMOST CONSIDERATION.**

I understand the above questions. I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts requested is cause for denial of adoption.

**I also understand that the adoption fee is not refundable if cat is returned.**

\_\_\_\_\_  
*Signature*

Return completed form to the Cat Adoption Coordinator.

\_\_\_\_\_  
*Date*

**For EGAPL Use Only**

\_\_\_\_\_ Landlord Verification or Proof of Ownership Provided

\_\_\_\_\_ Veterinary Records Provided

\_\_\_\_\_ Cat Carrier

\_\_\_\_\_ Adoption Fee Provided in Cash

Approval By: \_\_\_\_\_