



# TINY TIGERS RESCUE ADOPTION APPLICATION

P.O. Box 207 Toast, NC 27049

## APPLICANT INFORMATION

Name of Cat desired: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

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

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

ID Number (Driver's License, State ID, SSN, or Military ID) : \_\_\_\_\_

Employment Status: \_\_\_\_\_ employed name of employer/s: \_\_\_\_\_

\_\_\_\_\_ unemployed \_\_\_\_\_ disabled

\_\_\_\_\_ retired \_\_\_\_\_ student

Co-applicant Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employment Status: \_\_\_\_\_ employed name of employer/s: \_\_\_\_\_

\_\_\_\_\_ unemployed \_\_\_\_\_ disabled

\_\_\_\_\_ retired \_\_\_\_\_ student

## HOUSEHOLD INFORMATION

Number of adults in household: \_\_\_\_\_ Number (and ages) of children in household: \_\_\_\_\_

Is any in the household allergic to cats? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Does everyone in the household want a new pet? \_\_\_\_\_ If no, please explain: \_\_\_\_\_

Type of residence: \_\_\_\_\_ house \_\_\_\_\_ mobile home

\_\_\_\_\_ apartment \_\_\_\_\_ condo

\_\_\_\_\_ dorm \_\_\_\_\_ other (please explain) \_\_\_\_\_

Do you own or rent your residence? \_\_\_\_\_ own \_\_\_\_\_ rent

If rental, are cats allowed? \_\_\_\_\_

Name of apartment complex (if applicable): \_\_\_\_\_

Manager/Landlord Name and Number: \_\_\_\_\_

How long have you lived at the address listed? \_\_\_\_\_

Are you 21 or older? \_\_\_\_\_

Street Type: \_\_\_\_\_ highway \_\_\_\_\_ busy road

\_\_\_\_\_ slight traffic \_\_\_\_\_ residential

\_\_\_\_\_ other (please explain): \_\_\_\_\_

where will the cat live? \_\_\_\_\_ indoor only \_\_\_\_\_ outdoor only

\_\_\_\_\_ garage/basement \_\_\_\_\_ indoor/outdoor (please explain); \_\_\_\_\_

Where will the cat be kept during the day? \_\_\_\_\_ indoors- full access \_\_\_\_\_ crated

\_\_\_\_\_ indoors-limited access

If limited access, please explain: \_\_\_\_\_



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## HOUSEHOLD INFORMATION CONTINUED

Where will the cat be kept during the day?  indoors- full access  crated  
 indoors-limited access

If limited access, please explain: \_\_\_\_\_

How many hours will the cat be left alone? \_\_\_\_\_ Where will the cat stay when alone? \_\_\_\_\_

Describe the activity of your home:  busy (lots of company, children, etc)

Noisy (tv, dogs, music)

moderate (normal comings and goings)

Quiet (few guests)

other (please explain): \_\_\_\_\_

In the absence of the primary caregiver, who will care for the cat:

\_\_\_\_\_  
\_\_\_\_\_

## ADDITIONAL INFORMATION

Have you ever surrendered a pet in the past?  yes  no

If yes, please explain: \_\_\_\_\_

Have you ever had an animal removed from your care by animal control?  yes  no

If yes, please explain: \_\_\_\_\_

Under what circumstances would you return the cat to us?

Divorce  New job  New baby

Move  Illness  Other (please explain): \_\_\_\_\_

Will you take responsibility for the cat if they become ill?  yes  no (explain): \_\_\_\_\_

Are you willing/able to afford the veterinary costs of caring for your new cat?  yes  no

If no, please explain: \_\_\_\_\_

Do you plan to declaw your cat?  yes  no

How much time will you give your new cat to adjust to your household? \_\_\_\_\_

How long have you been looking for a new companion? \_\_\_\_\_

What attracted you to this cat? \_\_\_\_\_

Have your current pets been exposed to and are tolerable of other pets?  yes  no

If no, please explain: \_\_\_\_\_

Are you aware that a cat is a large and lifelong commitment?  yes  no

If no, please explain: \_\_\_\_\_

How did you hear about Tiny Tigers Rescue? \_\_\_\_\_

Have you ever applied for pet through any other rescue?  yes  no

If yes, please state rescuer's name and date applied: \_\_\_\_\_



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## VETERINARIAN INFORMATION

Please list the pets you currently have or have had in the past five years:

Name: \_\_\_\_\_ Type (dog/cat): \_\_\_\_\_ Spayed/Neutered? \_\_\_\_ yes \_\_\_\_ no  
Currently on vaccines? \_\_\_\_ yes \_\_\_\_ no Where is the pet kept? \_\_\_\_\_  
Still own? \_\_\_\_ yes \_\_\_\_ no (please explain): \_\_\_\_\_

Name: \_\_\_\_\_ Type (dog/cat): \_\_\_\_\_ Spayed/Neutered? \_\_\_\_ yes \_\_\_\_ no  
Currently on vaccines? \_\_\_\_ yes \_\_\_\_ no Where is the pet kept? \_\_\_\_\_  
Still own? \_\_\_\_ yes \_\_\_\_ no (please explain): \_\_\_\_\_

Name: \_\_\_\_\_ Type (dog/cat): \_\_\_\_\_ Spayed/Neutered? \_\_\_\_ yes \_\_\_\_ no  
Currently on vaccines? \_\_\_\_ yes \_\_\_\_ no Where is the pet kept? \_\_\_\_\_  
Still own? \_\_\_\_ yes \_\_\_\_ no (please explain): \_\_\_\_\_

Name: \_\_\_\_\_ Type (dog/cat): \_\_\_\_\_ Spayed/Neutered? \_\_\_\_ yes \_\_\_\_ no  
Currently on vaccines? \_\_\_\_ yes \_\_\_\_ no Where is the pet kept? \_\_\_\_\_  
Still own? \_\_\_\_ yes \_\_\_\_ no (please explain): \_\_\_\_\_

Veterinarian Clinic Name: \_\_\_\_\_ Number: \_\_\_\_\_

**NOTE:** The veterinary reference check is a requirement of our application process. If your pets were listed at the vet under a different name than that of the person completing this application, please ensure that we have both names. If you have utilized multiple veterinarian clinics for your pets, please provide contact information for additional clinics as well. If you have additional pets to list, please do so on the back of this form.

## PERSONAL REFERENCES

Please list at least 2 personal references:

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

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

## SIGNATURES

Please initial the the agreements below.

\_\_\_\_\_ I do hereby acknowledge that I have answered the above questions honestly and accurately. If, after adoption, should a Tiny Tiger volunteer discover the information provided on this application to be untrue, I agree to surrender the animal back to the care of Tiny Tigers immediately, as such is teh consequence of providing false information.

\_\_\_\_\_ I do hereby understand, and agree to, the finalization of this adoption being contingent upon my veterinarian and/or personal reference check.

\_\_\_\_\_ Should the veterinarian or personal references indicate other pets how are/have been in my care, are/were not cared for, are/were not kept on current vaccinations, or have not been spayed/neutered, I understand Tiny Tigers has the right to deny my application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for taking the time to complete this application and wanting to give a Tiny Tiger a home. Your answers will permit us to more effectively match your needs with a compatible companion for your home. Once we receive your completed application, we will review your responses, check your vet, and get back to you as soon as possible. Our goal is to place our kitties into permanent loving homes. We process the applications as they arrive. We reserve the right to decline any application for any reason.