



# OC Shelter Partners

Shelter Intervention Program

*Keeping pets in good homes*

## CAT ADOPTION APPLICATION

Name of pet(s) you are interested in adopting:

\_\_\_\_\_

### Personal Information:

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

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

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

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

How long have you lived at your current address? \_\_\_\_\_ Years \_\_\_\_\_ Months

Do you rent or own? \_\_\_\_\_ Rent \_\_\_\_\_ Own

If you rent, provide Landlord name, address and phone: \_\_\_\_\_

\_\_\_\_\_

Do you have permission from your landlord to get a cat? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you aware of pet deposit and monthly fees (if any) required? \_\_\_\_\_ Yes \_\_\_\_\_ No

Where is your cat going to spend the day/night? \_\_\_\_\_ Indoors \_\_\_\_\_ Outdoors

What is your family's lifestyle like? \_\_\_\_\_ Active and on the go \_\_\_\_\_ Quiet and relaxed

\_\_\_\_\_ Entertain frequently \_\_\_\_\_ Lots of kids in and out \_\_\_\_\_ Travel frequently

Do you have children? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you have children, please list name(s) and age(s):

Name	Age

Why did you decide to get a cat?

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What are you looking for in a pet?

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Who will be responsible for taking care of the cat?

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How many hours per day will the cat be alone?

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Where will the cat stay when no one is at home?

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Where will the cat stay when you are home?

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Where will the cat stay at night?

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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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Please provide the following information about your current pets:

<b>Name</b>	<b>Breed</b>	<b>Age</b>	<b>Spayed/Neutered</b>
			___ Yes ___ No
			___ Yes ___ No
			___ Yes ___ No
			___ Yes ___ No
			___ Yes ___ No

If applicable, please provide the following information about any pets you have had in the last 5 years that are no longer with you:

Pet Name and Type	Reason Pet Is No Longer With You

Current or Previous Vet's Name:

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Practice Name:

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Address:

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City, State, Zip:

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

Thank you for your interest in our pets!

Please email your application to [liz@ocshelterpartners.org](mailto:liz@ocshelterpartners.org)