

BG Check _____ Date _____ SLBG Check _____ Date _____ Adoption Counselor _____ Date _____

ADOPTION SURVEY



GREAT PLAINS SPCA
Heroes for pets. Partners for life.

This survey should take five to seven minutes and will help us learn more about you and the types of pets that suit your home environment and lifestyle.

What type of pet are you interested in meeting? ☐ Cat ☐ Dog ☐ Small Animal

Are there any pets from our website or social media you had in mind for adoption before arriving? (please provide pet name(s) if possible)

About Your Household

First & Last Name _____ Preferred Pronouns _____

Co-Adopter First & Last Name _____ Preferred Pronouns _____
(if applicable)

Street Address _____ City, State & ZIP _____

Street Address 2 (ap. #, suite, etc.) _____

Phone 1 _____ Phone 2 _____ Email _____

I live in a(an): ☐ single-family home ☐ townhome or condo ☐ apartment.

I currently: ☐ own ☐ rent ☐ live at a relative/friend's house. Are there children who visit your home? ☐ Yes ☐ No

Are there additional people living in your home who are not with you today? If yes, please list the full name(s) and date of birth of the additional members of your household (ex: John Smith, 10/28/2003).

Tell us about your perfect match! These questions are used to help us match make you with your new pet.

What types of pets grab your attention and melt your heart? (Select all that apply)

- | | | |
|--|---|---|
| ☐ Puppies and/or kittens | ☐ A snuggly companion, the definition of chill | ☐ Seniors - I adore those gray muzzles |
| ☐ 'Spicy' kitties with cat-itudes! | ☐ Goofy dogs who will make me laugh every day | ☐ I'm not sure |
| ☐ Mutts of all kinds - I just love dogs! | ☐ Pets recovering from being hurt or sick | ☐ Other |
| ☐ Bonded pairs of pets who are best friends | ☐ Pets who have experienced abuse or neglect | |

Is there anything you want to talk with the counselor about during the adoption process? (Select all that apply)

- | | |
|---|--|
| ☐ Introducing the pet to kids and other family members | ☐ Introducing my pet to new people |
| ☐ What to expect when I get my pet home | ☐ What I should do with my pet in the first week |
| ☐ Introducing the pet to my other pets | ☐ How to potty train or litter box train my new pet |
| ☐ What supplies, food, and equipment I should get for my new pet | ☐ Other _____ |
| | ☐ N/A |

Are any of the following top priorities for you? (Select all that apply)

- | | | |
|---|---|--------------------------------|
| ☐ Has lived with kids or friendly towards kids | ☐ Has lived with cats or friendly towards cats | ☐ Other |
| ☐ Okay spending up to 10 hours alone | ☐ Confident meeting new people | |
| ☐ Has lived with small/med/large dogs or friendly towards dogs | ☐ Can go to dog parks and festivals | |
| ☐ Already potty-trained | ☐ Easy to walk on a leash | |

GREAT PLAINS SPCA
Heroes for pets. Partners for life.

☐ In bed with me or my family members ☐ Wherever they want! ☐ In a crate or enclosed room

☐ On the floor or pet bed ☐ Outside under the stars ☐ Other

☐ Acclimating them into our family ☐ Snuggle and cuddle time on the couch ☐ Just letting them be themselves

☐ Going out on adventures together ☐ Learning what they like and don't like ☐ Other _____

☐ I need a pet who will quickly acclimate to our schedule and family routines.

☐ I know the first days and weeks can be challenging and I'm willing to put in the effort and time.

☐ We don't have any expectations for our new pet and they can take as long as they need to adjust.

☐ Other _____

☐ I have reviewed the Meet & Greet House Rules and agree not to go face to face with any animals.

☐ I agree to present a government issued photo ID and consent to Great Plains SPCA running a background check on all legal adopters as part of our adoption screening process.

☐ I understand that Great Plains SPCA may deny an adoption at its discretion if information obtained during the adoption process raises concerns about the safety, welfare, or well-being of any animal or any person.

Adopter Signature _____ Date _____

Co-Adopter Signature _____ Date _____
(if applicable)

STAFF SECTION

