



## Cat Adoption Application

Thank you for your interest in adopting a cat rescued by SSPR. SSPR wants to make certain that every animal adopted goes to a loving home and that it will be well cared for. Because of this, our application asks a number of detailed questions which are necessary for our screening process.

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Name of the cat(s) you are interest in: \_\_\_\_\_

Your full name: \_\_\_\_\_

Your Age: \_\_\_\_\_ NOTE: You must be at least 18 to adopt from SSPR. Proof of age will be req.

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

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

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

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

Are you adopting for yourself or someone else? \_\_\_\_\_

Describe in detail the kind of cat you are looking for \_\_\_\_\_

What kind of pets have you had in the past? \_\_\_\_\_

Which of these do you still have? (Include age, sex, breed) \_\_\_\_\_

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Have they been spayed/neutered?      \_\_\_yes      \_\_\_no      \_\_\_don't know

Are they current on vaccines?      \_\_\_yes      \_\_\_no      \_\_\_don't know

Have they been tested for feline leukemia?      \_\_\_yes      \_\_\_no      \_\_\_don't know

Have they been tested for FIV?      \_\_\_yes      \_\_\_no      \_\_\_don't know

Are they declawed?      \_\_\_yes      \_\_\_no      \_\_\_don't know

If yes, where is the cat declawed?      \_\_\_\_\_front only      \_\_\_\_\_all four

What happened to the pets you no longer have? \_\_\_\_\_

Have you ever turned a pet into a shelter? \_\_\_\_\_

Have you ever had a pet euthanized? \_\_\_\_\_

If you have pets, will they adjust to a new cat in the house? yes no don't know

Why do you want this cat? (Please check all that apply)

Companion Companion for another pet House pet  
Barn cat Mouser Office cat Other

How many adults are in your family? \_\_\_\_\_ Children? \_\_\_\_\_ Children's Ages \_\_\_\_\_

Does any member of your household have an allergy to cats? yes no

Where do you live? House Apartment Condo Mobile Home Other \_\_\_\_\_

Do you own or rent your home? Own Rent

Where will your cat live? Indoors Outdoors Indoor/Outdoor  
Barn In the garage Unknown

Will you keep the cat up-to-date on vaccinations? yes no

Name/number of veterinarian? \_\_\_\_\_

If you go away for a few days, or on vacation, who will take care of the cat? \_\_\_\_\_

If you move, will you take the cat with you? \_\_\_\_\_

Are you aware that cats can live 15-20 years and are you willing to take responsibility for this cat for the next 10-20 years?

\_\_\_\_\_

Additional comments from applicant: \_\_\_\_\_

\_\_\_\_\_

**Thank you for taking the time to fill out our adoption application. It is an important tool for us to learn a little bit more about you and your preferences. By filling this out, you are giving us a better idea about you and your household so we can see if the cat or cats you are interested in adopting, will be a good match for you and your family.**

Potential adopter signature

Date