



This section to be completed by staff:

Last Name: _____ Date of app: _____

Action Req'd for processing: _____

TACOM: Pet name & ID: _____ Follow up date: _____

Meet & Greet OR Hold until: ___ AM ___ PM on _____

Pet Adopted: Name _____ ID# _____ Date: _____

Adopter Information

Date: _____

App Expires on: _____

First Name: _____ Last Name: _____

Street Address: _____

Town/City: _____ State: _____ Zip: _____

Home Phone: _____ Alternate/Cell Phone: _____

Email: _____

Williamson County Resident? YES NO Age of Adopter is 18+? YES NO

Have you adopted from WCAC before? YES NO

Emergency Contact Person: Name: _____ Phone: _____

Home: Own Rent Apartment: Own Rent Complex Name: _____

Are you on the lease agreement? YES NO Roommates? YES NO

Landlord Name/Phone: _____

Staff Verification- This section to be completed by staff. WCAC reserves the right to deny any adoption application.

Animal Name & ID: _____

Driver's License / State ID #: _____ State: TN or Other _____

Adopter DOB: _____ Address verified: MATCHES STATE I.D. OTHER

Rental Information verified (notes): _____

Information reviewed in ShelterPro: _____

Approved Denied If Denied please explain: _____

WCAC Representative Print: _____ Date: _____

GENERAL

What type of pet are you looking for? Kitten Cat Puppy Dog Senior Special Needs

What pets currently live in your home? (list) Are they spayed/neutered?(y/n)

Veterinarian’s name and phone number to verify rabies: _____

When did they last visit a veterinarian? _____

What pets have you had in the past? _____

Describe your family/household: Adults: _____ Are they on board for a new pet? _____

Kids (ages): _____

If you encounter any challenges with your new pet, will you contact WCAC for help? Y _____ N _____

If you ever need to re-home your adopted pet, do you agree to return it to WCAC? Y _____ N _____

LIFESTYLE

What are you looking for in a new pet? _____

What is a typical day like for you? _____

How would you describe your household?

Very quiet & predictable Middle of the road A Carnival

Where will your pet stay while you are out?

Crate Closed room Free-range of the house Fenced Backyard Other

Where will your pet sleep at night? _____

Have you ever introduced a new pet into your home? What challenges did you face?

Do you travel a lot? Where would your pet stay? _____

When would you take a pet to see a veterinarian or emergency doctor?

CAT SPECIFIC

What is the ideal cat personality you are looking for? (circle all that apply)

Secretive/Hiding Playful Inquisitive Lap friendly Does not scratch Likes kids
Gets along with dogs Very active Inside only Indoor/outdoor Outdoor only

Would you consider adopting a pair of cats or kittens? _____ Special needs cat? _____

What will you do to prevent your cat from scratching furniture? _____

How would you introduce a new cat or kitten to your current cat? _____

Have you ever taught a cat to use a litterbox? Dealt with litterbox issues?

DOG SPECIFIC

What is the ideal dog personality that you are looking for? (circle all that apply)

Total couch potato Playful Inquisitive Lap friendly Does not jump on people
Walks well on a leash Likes kids Gets along with other dogs Gets along with cats
Likes to run with me Likes to play at the dog park Stays outside Stays inside

At home, I want my dog to be by my side:

All the time some of the time little of the time

My dog needs to be able to be alone for:

Up to 4 hours 4-8 hours 8-12 hours 12 hours More

Do you have time to provide daily exercise for a high-energy dog? _____

I am comfortable training my dog to improve manners such as jumping or pulling on leash?

No Yes-somewhat Yes-a lot of training

Would you be interested in training discounts or referrals?

How will you housetrain your dog (if needed)?

What behavior would you consider a deal breaker?
