



# Shetland Sheepdog Placement Services of New Jersey, Inc.

## Adoption Application

### INSTRUCTIONS:

If you have any questions, contact us at: [info@njsheltierescue.org](mailto:info@njsheltierescue.org)

- Download the form to your computer, fill it out and save it, then email it to: [info@njsheltierescue.org](mailto:info@njsheltierescue.org)
- Or Download the form, print and fill it out, scan it and email to: [info@njsheltierescue.org](mailto:info@njsheltierescue.org)
- Or Download the form, print and fill it out, then mail it to: **SSPSNJ, 107 Broad St., Suite 694, Hainesport, NJ 08036**  
Please put **"Adoption Application"** on the envelope.



We appreciate your interest in adopting a sheltie. In order to more accurately determine which of our rescues have the personality and behavior characteristics which will match and adapt more readily to your lifestyle, we have prepared the following required application.

**Please be candid** – it is to both you and the dog's benefit.  
Feel free to add any comments

Applicant Name(s):			
Address:			
City, State, Zip:			
Phone:	Home:	Work:	Cell:
Email Address:			
<b>Personal References</b>			
Veterinarian:		Phone:	
Veterinarian:		Phone:	
Groomer:		Phone:	
Other:		Phone:	

In order to adopt a sheltie from Shetland Sheepdog Placement Services of NJ you must be 21 years of age or older.			Are you 21 years of age or older?	Yes	No
			As an adult, is this your first dog?	Yes	No
Have you ever adopted a dog?	Yes	No	If yes, from whom?		
Do you still have the adopted dog?	Yes	No	If not, please explain:		
Is everyone in your household agreeable to adopting a dog?				Yes	No
➤ If no, please explain their concerns:					
Is anyone in your home timid or afraid of dogs?				Yes	No
➤ If so, please explain:					
Do you want to adopt a dog as a companion for:					
a. an individual	b. a couple	c. a family companion	d. a child	e. companion for another dog	
Do you have children (own, foster, adopted, stepchildren, grandchildren) living in your home?				Yes	No
➤ If yes, please indicate: # Boys:				Ages:	# Girls:
				Ages:	
How would you describe their personalities/activity levels?			High	Average	Quiet
Do the child(ren) listed above have experience handling animals?				Yes	No
➤ If yes, please explain:					

Do you have any children who visit your home on a regular basis?				Yes		No	
➤ If yes, please indicate: # Boys:      Ages:      # Girls:      Ages:							
Do other animals frequently visit your home?				Yes		No	
➤ If yes, please explain:							
Are there older adults sharing your home?				Yes		No	
➤ If yes, please list:							
As an aid in selecting the right dog for your family, please let me know if there is anyone living with you that is either physically or mentally challenged.							
➤ Please explain:							
Is anyone in your home allergic to dogs?				Yes		No	
➤ If so, please explain:							
Do you own or rent your residence?				Own		Rent	
If you rent, please attach a copy of your renter's agreement.							
Is your yard securely fenced?				Yes		No	
➤ If yes, what type of fence?				Height at low end:		Highest point:	
If your yard is not fenced, do you plan on:							
➤ Fencing in all, or part of it:				Yes		No	
➤ Walking and exercising your dog on leash:				Yes		No	
➤ Installing an electric fence:				Yes		No	
➤ Use a trolley or other method:				Yes		No	
• If other method, please explain:							
Do you have a pool?							
Yes <input type="checkbox"/> No <input type="checkbox"/> In-ground <input type="checkbox"/> Above ground <input type="checkbox"/> Is the pool separately fenced from the yard? Yes <input type="checkbox"/> No <input type="checkbox"/>							
Do you have a trampoline?							
Yes <input type="checkbox"/> No <input type="checkbox"/> Is it fenced in? Yes <input type="checkbox"/> No <input type="checkbox"/>				Does your home have a dog door? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Are there currently any dog(s) and/or cat(s) in the home or on the property?				Yes		No	
<b>Breed</b>		<b>Dog/Cat</b>		<b>Age</b>		<b>Sex (indicate if neutered)</b>	
➤ If you have dogs, please tell us a little about them (ex. personality, behavior, friendly):							
Tell us about any medical conditions these dog(s)/cat(s) have:							
Are any of the current dogs "dog aggressive"?				Yes		No	
➤ Please explain:							
➤ If you own cats, have they been exposed to dogs?		Yes <input type="checkbox"/> No <input type="checkbox"/>		➤ Do your cats hide or attack the dog(s)?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Explain:			
Do you have any other pets (ex. ferrets, rabbits, birds, reptiles allowed out of cage, farm animals, etc.)?				Yes		No	
➤ Please tell us about them: <small>(any additional information such as medical conditions that your pets may have to help us in selecting the best sheltie for you to adopt)</small>							
At anytime, have you ever placed or given away a pet?				Yes		No	
➤ If yes, please explain:							

Please provide SSPSNJ with the name of the veterinarian you currently use or the veterinarian that you previously used.

**Note: Veterinary references are checked.**

➤ Name:

➤ Address:

Phone:

Name of pet(s):

If you adopt a sheltie from SSPSNJ, will you be using the same veterinarian?

If not, you must provide the name and address of the veterinarian you will be using.

➤ Name:

➤ Address:

Phone:

If you adopt a dog from SSPSNJ, would you consider taking the dog through an obedience beginners class?

Yes

No

Have you ever obedience trained a dog?

Yes

No

**Should you adopt a sheltie, please answer the following:**

a. Who would be the primary care giver?

b. Do all adults work full time?

Yes

No

c. How many hours a day would the dog be left alone:

Hrs. \_\_\_\_

On the average from:

am/pm to am/pm

d. When left alone, where would the dog be kept?

e. While you are home where will the dog be kept?

f. How much of the time with your dog will be devoted to playing and working with the dog?

g. As the primary caregiver, does your job require frequent travel?

Yes

No

How often:

How long:

➤ Who would take care of the dog while you are traveling?

h. Is this dog being adopted to be part of the family:

Yes

No

➤ As a companion for yourself:

Yes

No

➤ As a companion for yourself and your children:

Yes

No

➤ For your children:

Yes

No

➤ As an alert dog:

Yes

No

➤ Companion to another dog:

Yes

No

i. Do you intend the dog to have full run of the house?

Yes

No

j. Do you intend the dog to have access to only a couple of rooms?

Yes

No

➤ What rooms:

➤ What rooms would be off limits:

k. Do you intend it to be primarily an outdoor pet?

Yes

No

l. How do you transport your dog in the car? Crate ☐ Car Harness & Tether ☐ Loose in Back Seat ☐

m. When you are on vacation, who will take care of your dog(s):

➤ Neighbor:

Yes

No

➤ Boarding kennel:

Yes

No

➤ Your veterinarian:

Yes

No

➤ Pet sitter:

Yes

No

➤ Other: (Please indicate)

Yes

No

n. Does your township or HOA have a dog limit? No ☐ Don't Know ☐

Yes ☐ What is the dog limit? \_\_\_\_\_ Don't Know ☐

**What made you decide you wanted to adopt a sheltie?**

a. I was raised with a sheltie.	Yes	No
b. As an adult, I own/have owned a sheltie.	Yes	No
c. I know someone with a sheltie.	Yes	No
d. I have researched the different breeds and feel that a sheltie best fits our family's needs.	Yes	No
e. Other: (Please explain)		

**Please tell us a little about the dog you are looking for:****Would you consider?**

a. Knowing we get dogs of various ages, please give us an idea of the age range you would consider:

Between		and		years
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b. Will you accept a dog who has TREATABLE medical problems (i.e., needs medication)?

Yes	No
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c. Does it matter if it is male or female?

Yes	No
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➤ which one are you looking for...

Male	Female
------	--------

Size preference

Color preference

**Should you adopt a sheltie, you are aware and fully agree to the following statements:**

a. Due to their long coats, they require a thorough brushing a minimum of once a week	Yes	No
b. Some shelties are very vocal. They will bark at almost anything. Have you considered if this will cause a problem between you and your neighbors?	Yes	No
c. You will assume the full cost and responsibility of feeding, caring and maintaining a comfortable environment for the dog.	Yes	No
d. You will assume the full cost of veterinary care, i.e., agree to take the dog to the veterinarian not only for annual checkups, but as necessary to maintain the health and well-being of the dog?	Yes	No
e. That <b>Shetland Sheepdog Placement Services of NJ</b> has the right to come visit you and the dog, and if at any time feels that you are not fulfilling your signed agreement, will have the right to remove the dog from your premises. SSPSNJ will not reimburse any fees.	Yes	No
f. That at any time you feel you can no longer keep the dog, you will contact <b>Shetland Sheepdog Placement Services of NJ</b> . Should you no longer live in NJ or the tri-state area, <b>Shetland Sheepdog Placement Services of NJ</b> will help you find a sheltie rescue that will work with you in finding a temporary or permanent home for your dog. At no time will this dog be left homeless or placed in a shelter.	Yes	No

**Have you volunteered with SSPSNJ in the past?** ☐ Yes ☐ No **Would you be interested in volunteering?** ☐ Yes ☐ No

If you volunteered in the past, briefly describe your role: \_\_\_\_\_

If yes, please fill out the included Volunteer Form and return it to us. Please indicate your area(s) of interest.

Signature of Adopter \_\_\_\_\_ Date \_\_\_\_\_

Adopter Print Name \_\_\_\_\_

Signature of SSPSNJ Representative \_\_\_\_\_ Date \_\_\_\_\_

SSPSNJ Representative Print Name \_\_\_\_\_



Thank you for completing this form. It will help SSPSNJ in determining which of our shelties may fit your lifestyle. We will contact you when one becomes available.

A non-refundable adoption fee is charged for each sheltie placed through Shetland Sheepdog Placement Services of New Jersey, Inc. This fee is used to help offset veterinary and care costs for our dogs.

Should you adopt a dog through our services you will be required to sign an adoption agreement.

**SSPSNJ reserves the right to refuse any application at any time.**



# Shetland Sheepdog Placement Services of New Jersey, Inc.

## SSPSNJ Volunteer

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- Or Download the form, print and fill it out, then mail it to: **SSPSNJ, 107 Broad St., Suite 694, Hainesport, NJ 08036**  
Please put **"Volunteer Application"** on the envelope.

### Volunteer Information:

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

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

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

Phone Number (     ) \_\_\_\_\_ Cell Phone: (     ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

I am available: \_\_\_\_\_

I can help provide financial support: \_\_\_\_\_

I am willing to help with:

Fostering \_\_\_\_\_

Fundraising Expertise \_\_\_\_\_

Home Visits \_\_\_\_\_

Transportation \_\_\_\_\_

SSPSNJ Picnic \_\_\_\_\_

Games at Picnic \_\_\_\_\_

Picnic Raffle Baskets & Items \_\_\_\_\_

Holiday Raffle Baskets & Items \_\_\_\_\_

Booths at Events \_\_\_\_\_

Facebook Updates \_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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