



**SMALL ANIMAL ADOPTION QUESTIONNAIRE**

Name of Animal \_\_\_\_\_ Animal ID# \_\_\_\_\_ Species \_\_\_\_\_

**APPLICANT INFO**

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Phone \_\_\_\_\_ Alt Phone \_\_\_\_\_ DL or ID# \_\_\_\_\_

**Circle the option on each line that you feel best suits you and your home:**

I consider my home to be most like:	A library (calm & quiet)	Middle of the road (sometimes quiet, sometimes a lot going on)	Grand Central Station (We have lots of people coming and going and a lot going on most of the time)
I have owned a small animal before:	No	Yes: <input type="checkbox"/> 2-10 yrs ago <input type="checkbox"/> 10+ yrs <input type="checkbox"/> Within the past year	I currently own a small animal
When I'm home, I want my small animal to be by my side:	Little of the time	Some of the time	Most of the time
My small animal will spend his time:	In a hutch/cage outside	In a hutch/cage inside	<input type="checkbox"/> Loose in the house <input type="checkbox"/> Confined to one room
I want my small animal to enjoy being held:	Sometimes	Most of the time	It doesn't matter to me if my small animal likes to be held
It is important to me that my small animal: _____			
_____			
_____			

