

Application to Raise an AAADogs Puppy

| Name | Others Living in House (who) | | | | | |
|--|------------------------------|----------------|------------|------------------|---------------------------|--|
| Address | | | | ················ | | |
| Phone # | | | Cell # | Woi | rk # | |
| Profession _ | | | | Но | Hours Work/Day | |
| Describe the typical hours per day that no adult is in the house: | | | | | | |
| Will the Puppy/Dog Always Have Supervision (not left alone more than about 3 hours) | | | | | | |
| Does Anyone in the Home Use Recreational Substances or Tobacco in any Form? | | | | | | |
| Own Home | | Rent | | Other | | |
| Yard Fenced | Front | | Back | Sides | | |
| Animals in Home | • | Dogs | Cats | Other | | |
| lf Dogs, E | Breed(s | .) | | Age(s) | | |
| Have You Raised Dogs From Puppy to Adult | | | Adult | How Many | | |
| What Breed(s) | | | | | | |
| Briefly explain your experience(s) with dogs in your home: | | | | | | |
| | • | | | | | |
| Have You Ever H | lad a D | og That Was: / | Aggressive | Biter | Fearful | |
| What Type of Training Aids Have You Used | | | | | | |
| Are You Willing to Travel for Formal Training Y/N Are You Willing to Exercise Puppy/Dog Daily Y/N | | | | | | |
| Are You Willing to Travel for Veterinarian Appointments | | | | | | |
| Are You Willing/Able to Socialize Puppy According to AAADogs Guidelines? | | | | | | |
| Are You Willing to Purchase Food ¹ , Treats ² , etc. Designated by AAADogs, if Needed? | | | | | | |
| Are You Willing to Do or Have Grooming Done That Is Needed | | | | | | |
| Do You Have Any Negative History with Animals | | | | | | |
| If So, Please Explain | | | | | | |
| Are You Willing to Be Subject to Home Inspections Periodically | | | | | | |
| Are You Willing to Have Veteran and Family in Your Home One Afternoon a Week to Bond With Puppy? | | | | | | |
| Are rou winning t | UTIAVE | | | | veek to bond with r uppy: | |
| Signed: | | Date: | | | | |
| ¹ AAADogs pays 1 | | - | | | | |
| ² AAADogs provides a select amount of training treats and chews | | | | | | |
| Send application to address below - or - scan and email to info@aaadogs.org | | | | | | |

501(c) (3) Organization EIN: 46-5407698 Po Box 4883 Federal Way, WA 98063 Tel: 206-696-3312 www.aaadogs.org