

*References*

Please provide three references not related to you:  
(one neighbor)

Reference #1 Name: \_\_\_\_\_

\_\_\_\_\_

Day Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

Reference #2 Name: \_\_\_\_\_

\_\_\_\_\_

Day Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

Reference #3 Name: \_\_\_\_\_

\_\_\_\_\_

Day Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

If you were referred by anyone, please tell us so we  
may thank him or her:

\_\_\_\_\_

I certify that the information provided on this form  
is true and correct. I am also financially able to care  
for this animal. I understand that proper food and  
veterinarian care can be costly and I am able to  
meet these requirements. I understand that a home  
check may be required prior to adoption. If upon  
inspection it is found that the information con-  
tained in this application is false, Big Sky Rottweiler  
Rescue retains the right to turn down the adoption.

Signature: \_\_\_\_\_

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

E-mail: [rottresq@hotpop.com](mailto:rottresq@hotpop.com)  
[www.bigskyrottrescue.org](http://www.bigskyrottrescue.org)  
[www.bsrr.petfinder.org](http://www.bsrr.petfinder.org)



Big Sky Rottweiler Rescue  
P.O. Box 221  
Laurel, MT 59044

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**Big Sky Rottweiler  
Rescue—  
Adoption Application**

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

(feel free to use an additional paper if needed)

**Adoption Information**

Type of dog you are looking for? \_\_\_\_\_

Specific traits? \_\_\_\_\_

Age preference? \_\_\_\_\_

Gender preference? \_\_\_\_\_

Type of temperament? \_\_\_\_\_

\_\_\_\_\_

Other (specify): \_\_\_\_\_

Do you agree to spay or neuter your dog? \_\_\_\_\_

Have you ever owned a Rottweiler? Y / N      How long?

If 'Yes' Where is that Rottweiler now?: \_\_\_\_\_

Why do you want a Rottweiler at this time? \_\_\_\_\_

\_\_\_\_\_

How much time will the animal spend alone during the  
day: \_\_\_\_\_

Are you looking for primarily an indoor dog or primarily  
an outdoor dog?: \_\_\_\_\_

Is someone home during the day? \_\_\_\_\_

If no, where will the dog stay during the day?

Where will the animal be kept when you are home?

Where will your dog be kept most of the time?

House    Outside    Basement    Kennel

Where will the animal sleep: \_\_\_\_\_

If kept outside will your dog have a dog run/dog house?

\_\_\_\_\_

## Adoption Information Cont.

What activities do you plan to do with your Rottweiler?: \_\_\_\_\_

If you said 'protection/guard' please explain:: \_\_\_\_\_

Will you take your dog to obedience class?: **Y / N**

If you do not plan to take the dog to obedience, please describe how you will train the pet: \_\_\_\_\_

Do you have a crate? : **Y / N**

Do you plan to use a crate? Why or why not?: \_\_\_\_\_

If 'yes', how many hours per day will the dog be crated?: \_\_\_\_\_

Do you currently have a dogdoor?: **Y / N**

What kinds of solutions would you be willing to try if housebreaking accidents occurred?: \_\_\_\_\_

Have you ever trained a dog before?: **Y / N**

If 'yes' please describe the training methods you have used in the past: \_\_\_\_\_

Have you dealt with dominance issues before?: **Y / N**

Are you familiar with pack behavior in your pets?: **Y / N**

Are you familiar with the signs of gastric torsion [bloat]?: **Y / N**

Have you applied to adopt from other rescues?: **Y / N**

If you have applied to other rescues, which ones and what were the results? : \_\_\_\_\_

Do you understand that often times the complete history of a rescue Rottweiler may not be known and you may encounter some initial adjustment problems? Yes No

Will you be willing to work with us on correcting those problems if they occurred?

Yes No I would have to return the dog.

Please give us any other information that may help us make the best match between you and your new Rottweiler:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Other Pet Information

Do you have other pets at this time? : **Y / N**

If 'yes' are they spayed or neutered yet?: \_\_\_\_\_

If 'yes' are they indoor or outdoor : \_\_\_\_\_

Type (list breed, age, sex):: \_\_\_\_\_

Are your other pets current on all vaccinations?: **Y / N**

Please provide us with your current veterinary information:

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

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

City/State/zip code: \_\_\_\_\_

Phone number: \_\_\_\_\_

If less than five years please provide us with your previous veterinary information:

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

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

City/State/zip code: \_\_\_\_\_

Phone number: \_\_\_\_\_

Have you ever given up a pet? **Y / N** If yes, please explain:

\_\_\_\_\_

List the pets you have owned in the last ten years and what has happened to them:: \_\_\_\_\_

\_\_\_\_\_

## Personal Information

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

Home Phone: \_\_\_\_\_

Work Phone/Cell Phone: \_\_\_\_\_

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

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

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

How long have you been at this address? \_\_\_\_\_

If less than 2 years please list your previous address:

\_\_\_\_\_

Married Single Live with parents

Your Employer: \_\_\_\_\_

Spouse Employer: \_\_\_\_\_

What is your age? \_\_\_\_\_ Spouse? \_\_\_\_\_

Are you expecting a child or planning a family?: **Y / N**

Does your or your spouse's job require frequent out of town travel?: **Y / N**

Are you or your spouse subject to relocation?: **Y / N**

Are you a student? : **Y / N**

Are you in the Military?: **Y / N**

How many children are living at home?: \_\_\_\_\_

Ages of all children included above: \_\_\_\_\_

How many people reside in your household: \_\_\_\_\_

Is anyone in your home allergic to animals?: **Y / N**

Does anyone have asthma?: **Y / N**

Is everyone in the household in agreement on adopting a Rottweiler?: **Y / N**

Who in the household will care for the pet: \_\_\_\_\_

Accept Collect Calls? : **Y / N**

Has anyone in the house been convicted of Animal Cruelty or Child abuse/neglect?: **Y / N**

## Residential Information

Residence: (circle those that apply)

House Apartment Condo Mobil Home

Do you Own Rent your residence?

If you rent, what is your Landlord's name:

\_\_\_\_\_

Phone: \_\_\_\_\_

Besides your immediate family, are there others residing in your home? : **Y / N**

Names/relationship of other residents: \_\_\_\_\_

\_\_\_\_\_

Does your home have a yard? **Y / N** How large is it? \_\_\_\_\_  
Is there a fence? **Y / N**

Type of fence and how tall? \_\_\_\_\_

\_\_\_\_\_

If yard is fenced, when gate is closed will the animal be completely enclosed? \_\_\_\_\_

Can strangers gain access to your yard from the street? **Y/N**

Does your city/county/state have breed specific legislation?: **Y / N**

If you have Breed Specific Legislation in your area, please explain what breeds and restrictions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_