



Shih Tzu Rescue of Minnesota, Adoption Application

P.O. Box 46562

Eden Prairie, MN 55344

Email: SHTZRMN@yahoo.com

(STRMN does not allow a person to apply for a dog to give as a gift)

*****When adopting a puppy, you are under obligation to have the pet spayed or neutered at 6 months of age, send STRMN a copy of the invoice from the Vet Clinic where the procedure was done, and then a \$150 refund/rebate will be sent back to you. (\$470 adoption Fee on all puppies: plus \$150 refundable Spay/Neuter deposit = \$620 Total Upfront Adoption Fee)**

Personal Information:

Your Name/or Co-Applicants name _____

Address: _____

City, State, Zipcode: _____

Phone Numbers: Home _____ Work _____

E-Mail address: _____ Best time to reach you: _____

Your Occupation/Work Place:

Household members, and their ages (including yourself):

Do you have children other than those living at home, or grandchildren that would be visiting frequently?

Briefly tell us why you want to adopt a puppy from STRMN:

Housing:

Do you Rent _____ Own _____

Single Family home _____ Townhome/Condo _____ Apartment _____

Do you have a Fenced in yard? Yes _____ No _____ If yes, describe the type of fence _____

If No, how will the Puppy get the exercise it needs, and/or relieve itself?

Does your home have a swimming pool? Yes _____ No _____ Is it fenced? Yes _____ No _____

Do you have restrictions regarding pets in your association or neighborhood? Yes _____ No _____ Don't know _____

Does your town or city have restrictions on the number of pets you can own? Yes _____ No _____ Don't know _____

Are you planning on moving in the near future? Yes _____ No _____

If and when you move, will you look for housing where pets are allowed?

Are there smokers in your household? __No __Yes __Yes, but not in the house, OR in the car with pets

(This breed has very short nasal passages, and because of this can be prone to respiratory and allergy issues. STRMN does NOT allow adoptions to homes with smokers. The dog's future health is our priority.)

Preferences:

Which particular puppy we have up for adoption that you are interested in?

Would interested in adopting a pair? Yes_____ No_____

Have you ever had a Shih Tzu before? Yes_____ No_____

Care and Responsibility

Are you aware of the special grooming and common health problems of the Shih Tzu breed? Yes_____ No_____

Are you willing to pay a groomer to groom your Shih Tzu every 6-8 weeks? Yes_____ No_____

Are you willing to brush your dog's coat daily, & clean the eyes daily if necessary? Yes_____ No_____

Can you commit to providing all necessary medical care for this dog for its lifetime? Yes_____ No_____

What provisions would you make for this dog if you were unable to care for it any longer?

How many hours would your dog be left alone each day: _____

Where will your dog be kept during the hours it is left alone?

If necessary, would you be able to come home after 4 hours to left the dog out to relieve itself, or make arrangements for someone else to do so? Yes _____ No _____

Where will your Shih Tzu sleep at night?

How long will your Shih Tzu be left outside?

Who will have primary responsibility for caring for the dog?

Does anyone in your home have allergies? Yes _____ No _____

What will you do if a family member or current pet does not get along with your new Shih Tzu?

Are you willing to houstrain your Shih Tzu in your home? Yes_____ No_____

Describe your method of discipline and training for a dog:

Who will watch your dog when you are out of town or on vacation?

History of Pet Ownership

What dogs do you **currently** have? (please include name of dog, breed, gender, whether spayed or neutered, age, how long owned, and where kept)—what year did you get them?

1.

2.

3.

Do you have any other pets? If yes, please describe:

****Upon the advice of our Canine Eye Specialist, we are hesitant about adopting Shih Tzu into homes with cats that are not declawed. Shih Tzu have protruding eyes, & a cat's natural defense & method of playing is using their paws/claws-making it very easy for a cornea to get scratched, however each home will be evaluated individually in this regard.**

- 1.
- 2.

Please list all the dogs **you have had in the past** & explain what happened to them. Please include name of dog, breed, gender, whether spayed/neutered, age, how long owned (the years in which you owned them), & what happened to them:

- 1.
- 2.
- 3.

References:

Please provide **THREE** references, (includes your Veterinarian and Groomer if you have one). Only 1 relative may be used. If you rent, you **must** include your landlord as a 4th reference. Please contact your references to let them know they may be called.

Veterinarian/Clinic: Best time to call is:

Name:
Address:
Phone:

Groomer: Best time to call is:

Name:
Address:
Phone:

Landlord: Best time to call is:

Name:
Address:
Phone:

Personal reference: Best time to call is:

Name:
Address:
Phone:
How does this reference know you?

Personal reference: Best time to call is:

Name:
Address:
Phone:
How does this reference know you?

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Name:
Address:
Phone:
How does this reference know you?

