



# CAT ADOPTION SURVEY

Thank you for choosing to adopt from the Kitsap Humane Society! To ensure that KHS animals and adopters are properly matched, we ask that you complete our adoption survey before proceeding to a meet and greet. We strive to ensure the compatibility of the human and animal and in some cases, an adoption may not be approved based on incompatibility. Kitsap Humane Society cannot guarantee the health status or behavior of the shelter pets you meet during the adoption process. By completing this survey and participating in an adoption counsel, you shall agree to indemnify and hold harmless Kitsap Humane Society and its representatives from liability and claim for any damages because of bodily injury, injury to your pet, sickness, or disease resulting from interactions with shelter pets during the adoption process.

Date: \_\_\_\_\_ Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Home Address: (Street) \_\_\_\_\_ Apt./Building #: \_\_\_\_\_  
 (City): \_\_\_\_\_ (State): \_\_\_\_\_ (Zip): \_\_\_\_\_  
 Mailing Address, if different: \_\_\_\_\_  
 Primary Phone: (\_\_\_\_\_) \_\_\_\_\_ Secondary Phone: (\_\_\_\_\_) \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Partner/Spouse Name \_\_\_\_\_  
 Alternate Contact (for microchip) Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Alternate contact does not live in the same household.

**I am interested in meeting the following cat(s)/kitten(s) today:** \_\_\_\_\_

**Household Information:**

Please select your age range:     18-20     21-25     26-35     36-59     60+

Number of adults in the home: \_\_\_\_\_

Number of children under 18 in the home: \_\_\_\_\_ Age of each child: \_\_\_\_\_

Do you:  Rent     Own     Live with relative(s)

Do you plan to move in the next 6 months?  Yes     No

Do you have a fenced yard?  Yes     No    If yes, what is the height and type of fencing? \_\_\_\_\_

What best describes your cat experiences?

I've never had a cat     As a child, I grew up with a cat(s)     As an adult, I have owned a cat(s)

**I currently share my home with the following animals:**

Dog / Cat / Other Species	Age	Breed	Male / Female?	Spayed / Neutered?	Length of Ownership?

**Home Environment:**

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**The activity level in my house is usually:**

- A place with constant activity & noise
- Sometimes noisy, sometimes quiet
- Quiet & calm most of time

**My cat will be around children:**

- All of the time
- Some of the time
- None of the time

**My cat will be housed:**

- Indoors
- Indoors/Outdoors
- Outdoors

**My cat will need to be alone:**

- Less than 8 hours a day
- 8-12 hours a day
- 12+ hours a day

**Personal Experience & Preferences:**

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**I want my cat to be:**

- Laid back
- Middle of the road
- Energetic and playful

**I want my cat to enjoy being held:**

- Very little
- Some of the time
- All the time

**When I'm home, I want my cat to be by my side or in my lap:**

- Very little
- Some of the time
- All the time

**I want my cat to interact with guests:**

- Very little
- Some of the time
- All of the time

**If the cat I adopt scratches things inappropriately, I feel comfortable:**

*(check all that apply)*

- Trimming the cat's nails
- Declawing
- Buying scratching posts
- Trying other humane deterrents

**Do you have experience working with cats to resolve or manage challenging behaviors? (overstimulation biting, scratching, escape tendency, swatting at hands/legs, slow adjusting to new environments, litterbox issues, etc.)**

- No experience
- Some experience
- A lot of experience

**Cat behavior(s) with which I am not comfortable include:**

- Overstimulation biting
- Scratching furniture
- Escape tendencies
- Swatting at hands/legs
- Slow adjusting to new environments
- Litterbox issues
- Destructive Tendencies
- Fear-based bite history with humans
- History of altercations with other animals

**I'm open to a cat with special needs**

*(for behavior or medical):*

- Yes
- No
- Maybe

**I'm interested in adopting a bonded pair, or two cats/kittens that could live together:**

- Yes
- No
- Maybe

**FOR BARN CATS ONLY**

**What best describes your barn cat experiences?**

- Never had a barn cat       Previously owned a barn cat
- Currently have 1 or more barn cats

**Describe the structure and the property that the cat will mainly reside in:**

**Describe the confinement space where you plan to keep the barn cat in for 4-5 weeks:**

**I prefer the following type of barn cat:**

- Feral-Wild and/or unsocial, untouchable.** Will hide from all people. Can be aggressive if cornered. Excellent hunters.
- Semi-Feral-Undersocialized.** May allow touching but not handling. Will likely hide from strangers. May be unpredictable.
- Semi-Social-With Work.** Will likely allow touching and possibly handling. Usually scared of strangers, but may bond with family members over time
- Social-Friendly.** Will allow handling. May prefer to be indoor/outdoor cat. Can get overstimulated with too much petting.

**I certify that the above information is true. I understand that giving false information on this application is grounds for denying my application. I understand that this application remains the property of Kitsap Humane Society.**

Signature: \_\_\_\_\_ Drivers License: \_\_\_\_\_ State: \_\_\_\_\_

**Internal Use Only:**

Approved for ID# _____ Name _____ Counselor Notes:
<input type="checkbox"/> Yes
<input type="checkbox"/> Yes, pending Meet and Greet
<input type="checkbox"/> Yes, pending surgery
<input type="checkbox"/> No
Counselor _____
Meds to go home? <input type="checkbox"/> Yes <input type="checkbox"/> No      Needs cat carrier to go home? <input type="checkbox"/> Yes <input type="checkbox"/> No
FIV/FelV test? <input type="checkbox"/> Yes <input type="checkbox"/> No      Vaccines up-to-date and recorded in SB? <input type="checkbox"/> Yes <input type="checkbox"/> No