Social Companion/Adoption Dog Application

At Patriot PAWS, we strive to place service dogs of the highest quality with disabled veterans. As a result of these high expectations, some of the dogs are not able to complete the program to become a Certified Service Dog. These dogs are transitioned into different capacities—some receive a career change and become therapy dogs or work in law enforcement, others become working social companions and still others become wonderful family pets. These dogs have been through some of the same exceptional training as all Patriot PAWS service dogs, but due to medical, behavioral, or temperamental reasons, they do not meet the standards for becoming a certified service dog.

If you are thinking of adopting one of our lovable dogs as a family pet, please consider the following:

- Patriot PAWS Service Dogs acquires dogs from a variety of sources. These include, but are not limited to, breeders, rescues, donations and shelters. Consequently, some of our dogs are purebred, while others are mixed breeds.
- The dogs that are offered for adoption may have some type of medical, behavioral or temperamental problem. These issues will be disclosed to you before the adoption takes place.
- Upon adopting a Patriot PAWS dog, you will receive a description of the cues he/she has been taught. If you are receiving this dog as a social companion that will be working in the home for you we may ask that you visit Rockwall for up to 1 week to receive the training that you need to understand how the dog could be of use to you.
- We review all applications received. Dogs are paired with families based on the information provided in your application and on an evaluation our trainers will perform. This information will allow us to find the best match for our dogs and your family.
- Patriot PAWS reserves the right to deny an applicant based on information provided to us about a potential adopter or adoptive home. You will be notified in writing if your application is denied.
- Dogs adopted from Patriot PAWS are adopted out as companions only. The person adopting the dog agrees to assume all responsibility and liability for the dog, and will not take the dog in public as a service animal in any way or form.

If you are interested in adopting one of dogs as a Social Companion Dog, please fill out the application. After we receive your application, you will be placed on our current list of applicants. You will receive an e-mail or phone call once a suitable match is determined. You are welcome to call or e-mail periodically to check on the status of available dogs.

Effective: January 1, 2014
Social Companion Dog Application

This application must be filled out in its entirety before submission.

PERSONAL INFORMATION

Last Name: __________________________ First Name: __________________________

Street Address: __________________________________________________________

City: ___________________________ State: ___________ Zip Code: ______________

Birthday: __________________________

Please provide any applicable contact information:

Home Phone Number: (____) __________________________

Mobile Phone Number: (____) __________________________

Work Phone Number: (____) __________________________

E-mail Address: ________________________________________________

Have you served in the military? (Circle One)  Yes  No (If yes, please attach a copy of your DD 214)

Branch of Military Service: __________________________________________

Dates Served: ______________________________________________________

Military Rank: _____________________________________________________

Medals, Awards, Honors, Tours, or anything you would allow us to include in your story:

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Please tell us why you would like to adopt a Patriot PAWS dog: __________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________
Do you have any experience with dogs? □ Yes □ No
If yes, please explain: __________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
Please tell us any other information you would like us to know when considering placing a Patriot PAWS dog in your home: __________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
Where did you hear about Patriot PAWS Service Dogs? __________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

HOME ENVIRONMENT
Where do you currently reside? □ House □ Duplex □ Apartment □ Condo □ Other ________
If renting your home, do you have written permission from your landlord to own a dog? *You will be asked to provide proof of written permission before adoption is completed.* □ Yes □ No □ N/A
How many people live in your household? ______________________________
If there are children in your home, please provide their information:

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<th>GENDER</th>
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Other than the children residing in your home, will the dog be exposed to children on a regular basis?  
□ Yes □ No □ N/A
If yes, please explain: __________________________________________
________________________________________________________________
Do you have a fenced-in yard? □ Yes □ No

Who will be the primary care-giver of your Patriot PAWS adopted dog? ____________________________

How will this dog fit into your current family life? ____________________________________________

____________________________________________________________________________________

YOUR PETS

Do you have other pets in your home? □ Yes □ No
If yes, please list what type(s) of pet(s) you own (dog, cat, etc.), breed, gender, age and whether or not they have been spayed or neutered:

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Tell us how your pet(s) get along with unknown dogs: __________________________________________

____________________________________________________________________________________

Do you/will you own a crate for your Patriot PAWS adopted dog? □ Yes □ No

Where will your dog be kept during the day? ________________________________________________

____________________________________________________________________________________
Where will your dog be kept at night? ________________________________________________

_________________________________________________________________________________

How long will your dog be left alone during the day? Please explain: __________________________

_________________________________________________________________________________

_________________________________________________________________________________

**DOG PREFERENCE**

What size dog would you prefer? □ Under 60 lbs □ Over 60 lbs □ No preference

*Please note that weights will be approximations as many of the dogs available are still growing.*

What gender dog would you prefer? □ Male □ Female □ No preference

Do you have a veterinarian? □ Yes □ No

If yes, please provide the veterinarian’s information below:

Veterinarian Clinic/Name: _____________________________________________________________

Veterinarian’s Address: _______________________________________________________________

Veterinarian’s Phone Number: ________________________________

Do you have any disabilities that you believe a dog could help you with in the home? □ Yes □ No

If you answered “Yes”, please fill out the following pages to be considered for receipt of a Social Companion Dog.
MEDICAL STATUS

Disabled: (Circle) Y  N  Date of Disability:

_____________________________________________________________________________________
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Define Disability (please be as specific as you can):

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Cause of Disability (please be as specific as you can):

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Define Specific Need for a Companion Dog (please be as specific as you can):

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Effective: January 1, 2014
PTSD SYMPTOM CHECKLIST

Please check all that apply, if applicable.

☐ Having nightmares, vivid memories or flashbacks.

☐ Feeling emotionally cut off from others.

☐ Feeling numb or losing interest in things you used to care about.

☐ Becoming depressed.

☐ Thinking you are always in danger.

☐ Feeling anxious, jittery or irritated.

☐ Experiencing a sense of panic that something bad is going to happen.

☐ Having difficulty sleeping.

☐ Having trouble staying focused on one thing.

☐ Having a hard time relating to, or getting along with spouse, family or friends.

☐ Drinking or use of drugs.

☐ Working all the time to occupy your mind.

☐ Pulling away from people and becoming isolated.

If there are other behaviors that are affecting you negatively, please explain below:

_____________________________________________________________________________________

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EQUIPMENT REQUIRED

Please check all equipment you use:

Wheelchair – Manual □  Power □  Both □  Hearing Aid □  Crutches □  Cane □  Walker □
Prosthesis □  Wrist Brace □  Leg Brace □  3-Wheel Electric Scooter □  N/A □

Other: (Specify)

MEDIA RELEASE STATEMENT

Patriot PAWS Service Dogs periodically uses electronic and traditional media (i.e. photographs, video, audio, testimonials) for publicity and educational purposes. By my signature on this form, I acknowledge receipt of this document and give permission to Patriot PAWS and its designees to use such reproductions for educational and publicity purposes in perpetuity without further consideration for me.

I understand that I will need to notify Patriot PAWS Service Dogs if any changes to my situation occur that will impact this media release permission.

I have read the above release and am aware of its contents.

Applicant Signature: ___________________________ Date: ______________

Print Applicant Name: _________________________________________________

Street Address:

____________________________________________________________________________________

City: ___________________________ State: ____________ ZIP: ______________

Witness Signature: ___________________________ Date: ____________

Print Witness Name: ____________________________________________

Effective: January 1, 2014