Brainy Dogs Prospective Owner Application Form

(Please complete and return to Brainy Dogs Co-ordinator)

Title (Mr/Mrs/Ms) ……………………..

First name …………………………………….. Surname ……………………………………………………………….

Address ………………………………………………………………………………………………………………………………

 ……………………………………………………………………………………………………………………………...

 ……………………………………………………………………………………………………………………………….

Postcode …………………………… phone (home) …………………….. phone (mobile) …………………..

Do you live in a House, Flat, other? …………………………

Do you own or rent your own home? …………………... (As some landlords will not allow pets)

Do you have a garden? ……………….... Is it fenced/secure? …………………….

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Do you already have a dog of your own? ………………… Breed/ Age? ………………………………………………

Have you owned a dog before? ………………….

How long ago and what happened to the dog? …………………………………………………………………………..

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Do you have any other pets in the home? ……………

If yes please list. …………………………………………………………………………………………………………………………..

Have you owned other pets in the past? ………………

What type of animals, and what happened to them?.....................................................................

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How many persons are living in the home? Adults …….…… Children ……….…..

Do you regularly have children visiting the home? ……….…..

Do you have somewhere suitable to walk the dog? …………… Where? ………………………………………

 Who will be responsible for exercise? ………………………………………….

Where will the dog sleep at night? ………………………………………………..

Are you willing to allow us to visit you at home to assess you, and your homes, suitability for owning a brainy dog? …………………

Tell us why you want to take on the responsibility of a “Brainy Dog” and the benefits you think you will gain from this.

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What difficulties do you foresee in taking on the responsibility of a “brainy dog”, and how can we help you overcome this? ……………………………………………………………………………………………………………………

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How did you find out about Brainy Dogs?

Are you willing to undergo assessment , and monitoring to Blue Cross standards before taking on a dog?.................

Are you willing to help us monitor the effectiveness of the project by completing questionnaires and assessments on your health and wellbeing whilst part of the project? …………………………

Are you able to supply details of someone who will be willing to support you in this venture? …………….

Have you, or any of your household, been subject to a court order prohibiting you from keeping an animal? ……………………

Signed …………………………………………………………………… Date …………………………………………….

Thank you for completing this information.

All details that you have given will remain confidential to Headway Brainy Dogs.