



DogsInVests

Puppy Raiser/Sitter Application

W383 Carlin Trail
 Palmyra, WI 53156
 262.495.2766

meghank@dogsinvests.org

		DATE:		
APPLICATION FOR: PUPPY RAISER PUPPY SITTER (circle all that apply)				
PERSONAL INFORMATION				
NAME:				
ADDRESS:		CITY:		
STATE:		ZIP:		
PHONE #:		SECONDARY PHONE #:		
BIRTHDATE:		EMAIL ADDRESS:		
CO-APPLICANT INFORMATION:				
NAME:				
ADDRESS:		CITY:		
STATE:		ZIP:		
PHONE #:		SECONDARY PHONE #:		
BIRTHDATE:		EMAIL ADDRESS:		
Home Information				
I/WE LIVE IN A: HOUSE APARTMENT CONDO DUPLEX MOBILE HOME (circle one)				
YARD: FENCED UNFENCED (circle one)				
I/WE: OWN RENT LIVE WITH FAMILY (circle one)				
RENTERS PLEASE PROVIDE LANDLORDS NAME AND PHONE # BELOW:				
PETS ARE ALLOWED: YES NO (circle one)				
LIST OF EVERYONE WHO LIVES IN THE HOME THE DOG WILL BE AT:				
NAME		RELATIONSHIP		AGE
IS ANYONE LISTED ABOVE ALLERGIC TO DOGS? YES NO (circle one)				
ARE ANY FREQUENT VISITORS ALLERGIC TO/AFRAID OF DOGS? YES NO (circle one)				
DOES ANYONE IN THE HOME SMOKE? YES NO (circle)				
LIST ALL PETS IN THE HOME BELOW:				
NAME	SPECIES/BREED	SEX	AGE	NEUTERED/SPAYED



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PLEASE INCLUDE COPY OF VACCINATION RECORD FOR EACH PET LISTED ABOVE	
PLEASE LET US KNOW BELOW ABOUT ANY DOGS YOU HAVE CURRENTLY OR HAVE HAD IN THE PAST. Where did you get them? What were they like? What happened to them if they are no longer with you? Where did they go when you weren't home? Did they live indoors or outdoors?	
PLEASE CIRCLE ALL THAT APPLY TO YOUR EXPERIENCE WITH DOGS:	
CRATE TRAINING	OBEDIENCE CLASSES
HUNTING	OTHER
PLEASE LIST INFORMATION ON OTHER TRAINING HERE:	
EMPLOYMENT INFORMATION	
OCCUPATION:	
EMPLOYER:	
ADDRESS:	
WORK SCHEDULE:	
CO-APPLICANT EMPLOYMENT INFORMATION	
OCCUPATION:	
EMPLOYER:	
ADDRESS:	
WORK SCHEDULE:	
LIFESTYLE INFORMATION (circle all that apply)	
RETIRED-A LOT OF FREE TIME	RETIRED-A LOT OF FREE TIME WITH ACTIVITIES TO TAKE DOG ALONG
STUDENT-COLLEGE	STUDENT-HIGH SCHOOL
WORK AT HOME-ALWAYS WITH DOG	WORK OUTSIDE HOME-CAN TAKE DOG WITH TO WORK
WORK OUTSIDE HOME-CANNOT TAKE DOG WITH TO WORK	PROFESSIONAL DOG TRAINER
ACTIVE FAMILY-BUSY AND HAVE KIDS	ACTIVE ADULT-BUSY
TRAVELER-TRAVEL OFTEN FOR WORK OR FUN	



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DAILY ROUTINES
Are you able to take the dog with you to work, or with you during your daily activities? (circle one) Yes, all the time Yes, some of the time Unsure No Doesn't apply
If you need to leave the dog for an extended period of time alone at home do you have someone who always or almost always is able to come and let them out and provide them with food and water? YES NO (circle one)
If you need to leave the dog alone, how much time would they spend in the crate: Less than an hour 1-3 Hours 3-6 Hours 6-9 Hours 9+ Hours (circle one)
How soon can you be available accept a puppy into your home?
How did you hear about the puppy raiser/puppy sitter opportunity for our organization?
REFERENCE INFORMATION
By submitting this application you understand and agree to have DogsInVests contact your references,above and beyond the background check that is completed during the volunteer application process.
REFERENCE #1 (NON-RELATIVE)
NAME:
PHONE NUMBER:
EMAIL:
RELATIONSHIP:
REFERENCE #2 (NON-RELATIVE)
NAME:
PHONE NUMBER:



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EMAIL:
RELATIONSHIP:
To the best of my/our knowledge, the above information is true and accurate. I authorize my veterinarian to release any information requested by DogsInVests, Inc.
APPLICANT NAME (PRINT):
APPLICANT SIGNATURE:
DATE:
CO-APPLICANT NAME (PRINT)
CO-APPLICANT SIGNATURE:
DATE:
A background check for all individuals age 18 and older living in the home with the DogsInVests dog will need to be completed. Please list the names, phone number and email address for each individual below. DogsInVests will send them a background check form to complete at the email address listed.