



BERGIN UNIVERSITY of CANINE STUDIES
Release Dog Adoption Application

Every so often the Bergin University of Canine Studies, home of the Assistance Dog Institute has a dog that is not suited for the high demands of service dog work due to temperament and/or physical limitations. These dogs then become available for adoption. **There is a fee for our release dogs.** The dogs are fully vaccinated, micro-chipped, spayed or neutered and have received various levels of training. THESE DOGS ARE NOT SERVICE DOGS and are released from our program for specific reasons. However, these dogs are excellent companion animals. We will place the dogs in the most well-suited homes and will inform the new owner about each dog's limitations and training level. Thank you for your interest.

Date _____

Name(s) _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____ Evening Phone _____

Cell Phone _____ E-mail address _____

1) How did you hear about the Bergin University? _____

2) Why do you want to adopt one of our dogs? _____

3) What type of residence do you have?

House Townhouse Apartment Duplex Condo

4) Do you own or rent your residence? Own Rent

If you rent your home, can you provide written verification that dogs are permitted in your residence, along with your landlord's name and phone number? Yes No

Landlord's Name _____ Phone number _____

5) Do you have a fenced yard? Yes No

If yes, what type of fence do you have? _____ Height? _____

6) If the dog were destructive to the yard or building, how would you handle the situation? _____

7) Please list all the members of your household and their ages: _____

8) Who will be responsible for caring for this dog? _____

9) How will you exercise your new dog and how often? _____

10) Where will the dog stay during the day? _____

11) Where will the dog stay during the night? _____

12) How many hours will this dog be alone? _____

13) Do adult family members work outside the home? No Yes. Who? _____

14) Have you ever owned a dog? No Yes. When? _____

15) Please list any other pets in your household along with their ages and whether or not they've been neutered or spayed. _____

16) Can you provide proof of vaccinations for your pets? Yes No

17) Please give us the name and phone number of your veterinarian.

Name _____ Phone _____

18) What do you estimate it will cost to care for a dog each year? \$ _____

(Food, grooming, licensing, veterinary care, vaccinations)

19) What do you plan to feed the dog? _____

20) Do you have a breed or gender preference?

Male Female No preference

Golden Retriever Labrador Retriever Golden/Lab cross No preference

21) What energy level dog would you prefer?

High Medium Moderate Mellow

22) Are you willing to take responsibility for a dog for the rest of his/her life, possibly 10 years or more?

Yes No

23) Do you consent to a visit to your home from a Bergin University representative?

Yes No

24) If we can't come to your home due to distance, can you provide us with:

a) A video of your home, yard, family members and animals? Yes No

b) Three references we can contact? Yes No

25) Are you willing to come to Bergin University and pick up the dog? Yes No

I acknowledge that the information contained on this form is true and correct. I understand that any misrepresentation of facts may result in the removal of the adopted dog from my home.

Applicant's signature _____ Date _____

For office use only – Called:

Date: _____ Dog's Name _____

Comment: _____

Date: _____ Dog's Name _____

Comment: _____

Date: _____ Dog's Name _____

Comment: _____

Form adapted from Freedom Service Dogs Inc.

Bergin University of Canine Studies
Home of the Assistance Dog Institute
1215 Sebastopol Road
Santa Rosa, CA 95407
(707) 545-DOGS (3647)
(707) 545-0800 fax
www.berginu.org