



## Rehoming Application Form

This form should be completed by the individual who will be the main carer for the dog and include all relevant information for anybody who will share joint ownership (ie partner). This form is designed to gather information to assist us in assessing the potential for matching a dog with you. To enable us to do this, please complete ALL sections in full and return this form to your local Guide Dog Training School (details of which are available on our website or by calling 0118 983 5555)

We will use your personal information, provided below, to process your application.

### Section 1 – About you

Title:

**Have you previously enquired about our Rehoming Scheme?**

Yes                      No

First Name:

If "yes", please give further details:

Surname:

Address:

**Who lives in the home where the dog will be living?**

Number of Adults:

Children (specify ages):

If children visit the home please state ages or advise if not applicable:

County:

**Do you or any person(s) in your household have additional physical or emotional needs that we might need to consider when thinking about the right dog for you:**

Postcode:

Preferred contact numbers:

**Are you or have you ever been subject to a court order banning you from the ownership of any animal(s)?**

Email:

Yes                      No

**How did you hear about our Rehoming Scheme?**

If "yes" to the above, please give full details including date, length of ban and animals covered by the ban.

Web                      Friend/Family                      Other

(please specify)



## Section 4 – About other dogs/pets/experience

**Do you currently own a dog(s)?**

Yes                      No

If "yes", please specify:

**Breed:**

**Age:**

Male                      Female

**Neutered:**

Yes                      No

Length of ownership:

**Have you previously owned a dog? (other than any mentioned above). Please give details of breed, length of ownership and whether obtained as a puppy or adult.**

**Give brief details of any behavioural issues or health conditions you have experienced with current or previous dogs and state if you would be willing to take on a dog with similar traits again:**

**Please explain why you want to rehome a dog and provide a brief statement to support your application:**

**Do you currently own any other pets?**

Yes                      No

Please specify including species, age & where housed. eg: House Rabbits:

## Section 5 – New Dog Preferences

### Breed (tick all that you will accept):

Labrador       Golden Retriever  
 X-breed       Labrador x Golden Retriever  
 German Shepherd

### Age (tick all that you will accept):

6-12 months       12 months-3 years  
 3-6 years       6-9 years  
 9 years +       11 years +

### Please tick at least one of the following

A health condition that impacts on ability to work, eg joint/limb issues, allergies/skin conditions, eye conditions.

A behavioural issue that impacts on ability to work, eg distractions, possessive behaviours, lack of motivation, sensitivities.

### What provision is in place for holiday/emergency care?

### Please tick any essential criteria from the list below:

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>
Good with children	<input type="checkbox"/>
Good with strangers	<input type="checkbox"/>
Good with cats	<input type="checkbox"/>
Good with other dogs	<input type="checkbox"/>
Good with livestock	<input type="checkbox"/>
A good traveller	<input type="checkbox"/>
Good on the lead	<input type="checkbox"/>
Have good recall	<input type="checkbox"/>
Able to be left for short periods	<input type="checkbox"/>

**By ticking this box, I confirm all details to be true statements & I am over 18 years old.**

**Signed:**

**Date:**

### Keeping you in touch

To hear about ways you can donate or raise funds for our life-changing services, please let us know how you would like us to contact you (using the details above):

Please email me

Please call me

Please text me