

# SCAT Street Cat Rescue Program

## Screening for Potential Adopter



### MAILING ADDRESS

P.O. Box 31041  
Saskatoon, SK S7H 5S8

Phone: (306) 955-7228

Fax: (306) 955-1037

### SCAT ADOPTION CENTER ON FAITHFULL

Corner of 50<sup>th</sup> Street and Faithfull Avenue  
11 AM – 4 PM (W – F)      1 PM – 5 PM (Sat)

Email: [street.cat@sasktel.net](mailto:street.cat@sasktel.net)

[www.streetcat.ca](http://www.streetcat.ca)

Thank you for considering giving a SCAT cat a great home.

You must be 18 years of age or older and you must have ID showing your present address.

### **1: PERSONAL INFORMATION**

PRINT NAME: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Area of Residence: (i.e. Nutana) \_\_\_\_\_

Driver's License or other ID: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Do you have voice messaging or call display? \_\_\_\_\_

Email Address(es): \_\_\_\_\_

Do you have any Allergies? \_\_\_\_\_

Cat Experience: First time \_\_\_\_\_ / Have had one or two \_\_\_\_\_ / Have had all my life \_\_\_\_\_

Employment Status: Unemployed / Retired / Student / Homemaker / Employed

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### **2: RESIDENCE**

**Circle:**                      OWN                      OWNED BY FAMILY                      RENT  
Single Dwelling Home    Duplex    Townhouse    Condo    Apartment    Other: \_\_\_\_\_

### **Written Permission attached and provided by:**

FAMILY                      LANDLORD                      CONDO/TOWNHOUSE AGREEMENT

CONTACT Name & Number: \_\_\_\_\_  
\_\_\_\_\_

Pet Deposit?    YES / NO    Paid? \_\_\_\_\_    Number of pet permitted: \_\_\_\_\_

**3: ROOMMATE / PARTNER**

PRINT NAME: \_\_\_\_\_

Employer: \_\_\_\_\_ Work or Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Allergies? \_\_\_\_\_ Agrees to this adoption \_\_\_\_\_

**4: CHILDREN**

How many children? Ages? \_\_\_\_\_

Allergies? \_\_\_\_\_

Have they been around cats before? \_\_\_\_\_ Have they been taught how to handle a pet so as not to cause harm and to minimize stress to the pet or to themselves? \_\_\_\_\_ If not what plans do you have to teach them and who will teach them? \_\_\_\_\_

**5: PETS**

Please list the pets that presently reside in your home.

SPECIES	BREED / DESC	AGE	SEX	NEUTERED, IF NOT, WHY NOT?

Are any of your present or past pets declawed? \_\_\_\_\_

When was the last time you took your pet in for a checkup? \_\_\_\_\_

What veterinarian/clinic do you use or have used? \_\_\_\_\_

Are your pets licensed? \_\_\_\_\_ If not, why not? \_\_\_\_\_

**Welcome to SCAT Street Cat Rescue Program  
Screening of Potential Adopter**

Please list pets that previously lived with you and what has happened to them.

SPECIES	BREED / DESC	LIVED WITH YOU FOR HOW LONG?	NEUTERED	WHAT HAPPENED TO THEM?

**6: LOOKING FOR?** (please circle all answers that apply)

Special Needs Pet / Senior / Adult / Youth / Kitten      Breed \_\_\_\_\_

Long hair / Medium hair / Short hair / "Hairless"

Calm, Placid	Mellow, Easy Going	Somewhat Active	Very Active	Talkative
Affectionate	Cuddler, Lap Cat	Zippy, High Energy		
Independent	Doesn't Matter	Gets along with kids,	cats, dogs,	other?
Other considerations? (i.e. declawed)				

Cat Habits that I just can not tolerate are:

\_\_\_\_\_

What if this pet starts to do something you don't like?

\_\_\_\_\_

This pet is for myself / my family / my child / my work place / my barn / my pet / Gift for \_\_\_\_\_

**7: AFTER ADOPTION, THEN WHAT?**

Are you financially willing and able to provide for this pet's needs, which include food, water, supplies, toys, scratch posts, plenty of TLC, regular veterinary checkups, emergency treatments for illness and injury and boarding or catsitter for when you are away? \_\_\_\_\_

The activity/noise level in my home is usually: LOW / MEDIUM / HIGH

Time you spend away from home: Home all day / Out part time / Away 7 to 10 hours a day

How many hours pet will be left alone? \_\_\_\_\_

Where will pet be during this time? \_\_\_\_\_

My cat will live: Outside only / Outside & Inside / Indoors only

Do you have: Carrier? \_\_\_\_\_ Harness & Leash? \_\_\_\_\_

Enclosed yard? \_\_\_\_\_ Cat-proof fencing? \_\_\_\_\_ Enclosure? \_\_\_\_\_

What plans do you have for mental and physical stimulation of this pet, i.e. toys, playtime

What happens if someone develops allergies or if you have to move and you are unable to relocate to pet-friendly housing?

Do you plan to take this pet for regular veterinary checkups? \_\_\_\_\_

Do you plan to license this pet? \_\_\_\_\_

Do you plan to "bail" the cat out if they are picked up by Animal Control and pay the fines? \_\_\_\_\_

How long will you give this pet to adjust to its new home? \_\_\_\_\_

How much time are you planning to spend with the new pet to make them comfortable in the new home?

Will you feed dry or wet food or a combination? \_\_\_\_\_

## 8: CONTACT WITH STREET CAT RESCUE

Where do you know about SCAT from?

Please circle all that apply.

Family

Friends

Vet Clinic

Adopted before

Volunteer

PetFinder.com

Online search

PetSmart

SCAT Faithfull Adoption Center

Pets in the Park

Mall display

Pet Expo

Other Event

Star Phoenix

TV

Radio

Other \_\_\_\_\_

### VOLUNTEERING

Would you be willing to be a part of the team and join us to save the lives of cats and kittens? \_\_\_\_\_

Interested in?

Foster Home / Help at Adoption Center (either Faithfull or PetSmart) / Office / Feral Cat Care (outdoors or indoors) / Fundraising / Homechecks / Website / Programming / Newsletter / Event Coordinating /

Other: \_\_\_\_\_

### EMAIL LISTS

1. YES, please put me on the SCAT regular email list.
2. YES, please put me on the SCAT **limited** email list, only for upcoming events and when the newsletter is available online.
3. YES, **but only** regarding the pet that I adopted, thank you. I will check online myself for event listings.

**9: RELEASE**

I hereby give permission to SCAT to contact anyone necessary in order to verify any information contained within this application. This may include landlords and other animal welfare agencies, as well as my veterinarian to obtain information about past and present pets.

I understand that photos and/or stories of this pet may be used for success story presentations, website and/or newsletter, with the strict understanding that SCAT will not publish any personal contact information and will not use my last name unless I give my permission.

**10: LANDLORD: (if applicable)**

NAME: \_\_\_\_\_ Home/Work # \_\_\_\_\_

Address \_\_\_\_\_ Cell # \_\_\_\_\_

**11: REFERENCES:**

Relationship to you i.e. Friend, Family, Coworker, Veterinarian

1. NAME: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Home/Work Contact # \_\_\_\_\_ Cell # \_\_\_\_\_

2. NAME: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Home/Work Contact # \_\_\_\_\_ Cell # \_\_\_\_\_

3. NAME: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Home/Work Contact # \_\_\_\_\_ Cell # \_\_\_\_\_

**12: TERMS OF SCREENING APPLICATION AGREEMENT**

I certify that the information provided on this application is true and correct to the best of my knowledge. I understand that signature on this form is **NOT** a guarantee of adoption approval, however, if I am approved as an adopter, I agree to pay the adoption fee of \$\_\_\_\_\_ in cash or by cheque <sup>1</sup>.

Signature of Potential Adopter \_\_\_\_\_

Date \_\_\_\_\_

<sup>1</sup> NSF cheques will be invoiced and subject to charges which must be paid immediately in cash.

