



# CACC Adoption Questionnaire

*Welcome!*

*Please complete this questionnaire and bring it with you to your appointment. To connect with a counselor ahead of your appointment, please email [VisitCACCC@cityofchicago.org](mailto:VisitCACCC@cityofchicago.org).*

**Please list the names/ID #'s below of the pets you want to meet!  
We can also provide you with some recommendations during your visit:**

<i>Animal's Name/ID#</i>	<i>Animal's Name/ID#</i>	<i>Animal's Name/ID#</i>

Your name(s): Mr./Ms.: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone: \_\_\_\_\_

Alternate Contact Name: \_\_\_\_\_ Alternate Contact Phone: \_\_\_\_\_

How did you find us?  Social Media  Web Search  Word of Mouth  Billboards  TV  Other \_\_\_\_\_

**Why are you interested in adopting a pet?**

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*We welcome adopters who live in an apartment or condo. Please note that some property managers have size and breed restrictions, pet limits, and/or require pet deposits or additional fees. **Are you aware of any restrictions where you live?***

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**Tell us about your family!**

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**What would you like us to know about your current pets if you have any?**

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**Do you have any questions or concerns about introducing a new pet to your other pet(s)?**

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**Do you need assistance finding a veterinarian for your new pet? How can we help?**

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**Would you like assistance helping plan your new pet's daily routine?**

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**The topics below are covered in your adoption packet. Please let us know if you'd like to discuss any of these topics while you're here:**

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|---|--|
| <input type="checkbox"/> Feeding your pet                   | <input type="checkbox"/> Homeowners/rental insurance                     |
| <input type="checkbox"/> Pets and children                  | <input type="checkbox"/> Exercise, toys, and fun activities              |
| <input type="checkbox"/> Puppy/kitten-proofing your home    | <input type="checkbox"/> Finding a vet/trainer/dog walker/pet sitter     |
| <input type="checkbox"/> Introducing this pet to other pets | <input type="checkbox"/> Grooming/nail trimming                          |
| <input type="checkbox"/> Costs associated with owning pets  | <input type="checkbox"/> Cat scratching/declawing                        |
| <input type="checkbox"/> Low-cost vets and food pantries    | <input type="checkbox"/> House-training/litter box training              |
| <input type="checkbox"/> City dog registration              | <input type="checkbox"/> Dog training (crates, walking, barking, jumping |
| <input type="checkbox"/> Cropping ears or docking tail      | <input type="checkbox"/> Spay/neuter & vaccinations for your other pets  |
| <input type="checkbox"/> Cats living/going outside          | <input type="checkbox"/> Veterinarian visits: When/how often             |
| <input type="checkbox"/> Moving with pets                   | <input type="checkbox"/> Vaccinations & rabies Requirements              |
| <input type="checkbox"/> Microchips and other ID options    | <input type="checkbox"/> Taking care of recently spayed/neutered pets    |
| <input type="checkbox"/> Lost pets                          | <input type="checkbox"/> Fleas/ticks and heartworm                       |
| <input type="checkbox"/> Friends for kittens                | <input type="checkbox"/> FIV/FelV in Cats                                |
| <input type="checkbox"/> Types of leashes and collars       | <input type="checkbox"/> Acclimation/decompression in new home           |

**Other questions or concerns?**

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**Signature of Applicant:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

*Note: You may ask for a supervisor to review your questionnaire at any time and for any reason.*

Check here if you do **not** want to receive news from Friends of Chicago Animal Care and Control about special events, and/or occasional coupons or other special offers from pet product suppliers.

**\*FOR COUNSELOR/STAFF USE ONLY\***

Counselor Name: \_\_\_\_\_ Adoption Date \_\_\_/\_\_\_/\_\_\_ Pick Up Date: \_\_\_/\_\_\_/\_\_\_

Adopter P#: \_\_\_\_\_

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

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