

SCOTTISH TERRIER RESCUE NORTHWEST

“It’s All about the Scotty”

Scottish Terrier Rescue Northwest, was founded to assist in the rescue and placement of abandoned or unwanted Scottish Terriers from individual owners, humane societies, veterinary clinics, animal shelters and Scotties who are homeless. To protect rescued Scotties, Scottish Terrier Rescue Northwest attempts to place rescued Scotties as home companions in the homes of suitable owners, who agree to care for and protect their rescued Scottie, and share their home with the same consideration they would give a family member.

Home Study

Rescue Applicant’s Name: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

Email Address: _____

Date Home Study Completed: _____

Representative: _____

Part I – Family Information

Type of Dwelling: (Check Appropriate)

Apartment/Apartment-style Condominium Townhouse Duplex/Triplex
 House Farm Mobile Home Other

If other, please describe: _____

Were all members of the family present for the Home Study? Yes No

Please list those present, and ages of children, etc: _____

Do all members of the family seem to want a Scottie? Yes No

Which members seem enthusiastic? Unenthusiastic? _____

What is the family’s overall impression to owning a dog? _____

Does the applicant work outside the home? Yes No

How many hours would a Scottie be left alone each day? _____

Part II – Environmental Information

Is the applicant’s yard fenced? Yes No

What type of fencing and how tall? _____

What type of gates? _____

Is this fence secure? Yes No

If this fence is not secure, what improvements need to be made in order to make it secure? _____

Does applicant seem willing to make necessary improvements? Yes No

Did you notice any dangers inside the fence? Yes No

If yes, describe: _____

Is there a swimming pool on the property? Yes No

If yes, is it securely fenced? Yes No

Part III - Current Pet Information

Has the applicant owned a Scottie before? Yes No

If so, what happened to him/her? _____

Is anyone in the family allergic to pets? Yes No

Are there other pets in the family at this time? Yes No

If yes, list type, number and age:

If there are other dogs, do they seem aggressive Yes No or submissive? Yes No

Does applicant have the facilities to separate a Scottie from other pets if they cannot get along? Yes No

If Yes, list where: _____

Part IV – Overall Observations/Impressions

Please list your overall impression of the suitability of this applicant to adopt a Scottie through STRNW.

Would you place one of your own puppies in this home? Yes No

Do you feel confident a dog would get plenty of loving attention? Yes No

Do you feel the dog would be safe in the yard? Yes No

Does this family seem financially able to provide adequate veterinary care? Yes No

Your instincts can be trusted, so please list as much information as you can, so that we can make wise decisions in placing a dog with this family.

STRNW Representative Signature