



PUPPY RAISER APPLICATION

Application procedure: If you would like to raise a Guide Dog Puppy, please complete this application and return it to Southeastern Guide Dogs, Inc. at the address below.

NAME: _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP CODE _____

HOME PHONE: () _____ WORK PHONE: () _____

FAX: () _____ E-MAIL: _____

DRIVERS LICENSE #: _____ STATE _____

MAY YOU BE CONTACTED AT WORK? YES NO

DO YOU LIVE IN:

DO YOU?

AN APARTMENT/CONDO

RENT

A HOUSE (CITY)

OWN

A HOUSE (DEVELOPMENT/SUBDIVISION)

OTHER _____

A HOUSE (RURAL)

IF YOU RENT, HAVE YOU OBTAINED PERMISSION FROM YOUR LANDLORD?

YES NO

HOW LONG HAVE YOU LIVED AT YOUR CURRENT ADDRESS? _____

WHO WILL BE THE PRIMARY CARETAKER OF THE PUPPY? _____

PLEASE PROVIDE NAMES OF FAMILY MEMBERS AND AGES OF CHILDREN:

DO ALL FAMILY MEMBERS AGREE TO ABIDE BY THE TERMS AND GUIDELINES OF THE PROGRAM? YES NO

IS THIS PUPPY BEING RAISED AS A 4-H PROJECT? YES NO

IF A 4-H PROJECT, PLEASE INDICATE THE COUNTY, LEADERS' NAME AND ADDRESS:

WHAT EXPERIENCE HAVE YOU HAD WITH DOGS: _____

HAVE YOU EVER RAISED A PUPPY OR BEEN INVOLVED WITH ANOTHER GUIDE DOG ORGANIZATION OR OTHER RELATED ORGANIZATION? (THIS INCLUDES HUMANE SOCIETIES, RESCUE GROUPS, SERVICE DOG GROUPS, OBEDIENCE CLUBS, ETC.)

YES NO

IF YES, WHAT WAS YOUR INVOLVEMENT, AND WHAT ORGANIZATION?

WHAT HOURS/DAYS DO YOU WORK? _____

WHAT HOURS ARE PROJECTED FOR THE PUPPY BEING HOME ALONE? _____

WILL THE PUPPY BE ALLOWED TO SLEEP CRATED IN YOUR BEDROOM? YES NO

ARE YOU FAMILIAR WITH THE USE OF A DOG KENNEL CRATE? YES NO

(Circle all that apply)

WHERE WILL YOUR PUPPY STAY WHEN NOBODY IS AT HOME?

- a Inside my home
- b In a fenced in yard
- c In a crate
- d Lanai or screened in porch
- e Other: _____

HOW WILL YOU PROVIDE EXERCISE FOR THE PUPPY?

- a Take him on leash walks
- b In a fenced in yard
- c Take him to a dog park
- d In my unfenced yard
- e Put him on tie-out
- f Allow him to run free

HOW WOULD HAVING A PUPPY AS PART OF YOUR HOUSEHOLD FIT INTO YOUR BUDGET?

(Although Southeastern pays for basic veterinary expenses, please note it is your responsibility to pay for dog food, treats, flea control, and approved brand toys).

- a Any necessary feeding, care and grooming expenditures would be acceptable
- b I would like to donate veterinary care costs at the puppy's assigned vet
- c I would like to but would be unable at this time to donate veterinary costs

HOW MUCH TIME WOULD YOU BE ABLE TO DEVOTE TO EXPOSING THE PUPPY TO DIFFERENT ENVIRONMENTS OUTSIDE THE HOME AND YARD?

- a. I will get the puppy out 1 – 3 times per week
- b. I will get the puppy out 3 – 5 times per week
- c. I will be able to take the puppy with me daily and take it everywhere possible

WHICH BEST DESCRIBES YOUR PERSONALITY (the main handler)?

- a. Authoritative
- b. A bit of a softie
- c. Other, explain: _____

DO YOU UNDERSTAND THAT THE COMMITMENT OF RAISING THIS PUPPY AND BEING A SOUTHEASTERN GUIDE DOGS, INC. RAISER MAY LAST MORE THAN ONE YEAR?

___ YES ___ NO

DO YOU AGREE TO ATTEND 2 SCHEDULED MEETINGS PER MONTH WITH THE PUPPY?

___ YES ___ NO

DO YOU AGREE TO RETURN THE PUPPY TO SOUTHEASTERN GUIDE DOGS, INC. WHEN THE PUPPY IS CALLED IN FOR TRAINING? ___ YES ___ NO

HOW DID YOU FIND OUT ABOUT US? _____

Upon returning this application to Southeastern Guide Dogs, Inc, you can expect to receive a response within three to four weeks. You will be called to schedule an in home visit by an Area Coordinator.

If your application is approved, your name will be placed on a waiting list and you will be notified as soon as a puppy is available. Many times puppies are transported in groups geographically. A puppy would be placed in your care when a grouping is scheduled to be placed in your area.

COMMENTS OR QUESTIONS: _____

DIRECTIONS TO YOUR HOME:

VETERINARY CARE: Due to the growing volume of puppies in the Puppy Program and economic conditions, we consolidate our veterinary services. We have a network of Veterinarians that participate in our program. The puppy will come to you with an ASSIGNED veterinarian. These veterinarians will bill us directly at reduced rates, relieving you of the responsibility of asking for a discount, and any outlay of money. If this presents a problem with taking the puppy, please let us know immediately.

SIGNATURE OF APPLICANT(S) *Parent or Guardian must also sign if you are under the age of 18:*

(Parent or Guardian's signature)

(Print)

Date: _____

SEGDI USE ONLY:
