

**Chattahoochee Valley Bernese Mountain Dog Club
Questionnaire for Prospective Rescue Adoption Family**

Thanks for your interest in becoming an adoptive family as part of the CVBMDC rescue program. In order for an adoption to be successful we need make sure an appropriate match is made taking into consideration the Berner's needs and adoptive family's needs. Completion of this questionnaire will assist in our efforts to make sure Berners that come through our rescue program find their way into the most appropriate homes. Please answer the following questions completely and honestly. You will not be rejected as a possible placement solely on the basis of your answers. Please feel free to elaborate on additional pages.

Name: _____ Age: _____
Address: _____ Home Phone: _____
City/State/Zip: _____ Cell Phone: _____
E-mail: _____

1. Please list all the members of your household and relationship to you. Please describe their roles in the dog's care and life.
(Name, Sex, Age)

2. Please describe the characteristics of the ideal dog for you and your family?

3. Have you ever owned or personally met a Bernese Mountain Dog?
Yes No

4. Why do you want a Bernese Mountain Dog?

5. How did you learn about the breed?

6. Are you aware of the health problems common in Bernese Mountain Dogs?
Yes No

7. Are you aware that the care of some of the health problems common in Bernese Mountain Dogs can cost thousands of dollars?
Yes No

8. Why do you want a Bernese Mountain Dog from the rescue program rather than from some other source, such as a breeder?

9. What do you like about the breed?

10. What do you dislike about the breed?

11. Do all family members want a rescued Bernese Mountain Dog?

Yes No

If no, please explain:

12. The CVBMDC requires all rescue families to attend training class with their new dog or to hire an in-home trainer. Are you and all of your family members committed to attending training classes or working with a trainer?

Yes No

If no, please explain:

13. Is anyone allergic to pets/dogs?

Yes No I don't know

If yes, please explain:

14. What is your occupation? What are your work hours? Days per week?

15. What is spouse/partner/co-owner's occupation? What are his/her work hours? Days per week?

16. Is someone home during the day?

Yes No

17. On average, how many hours will the dog be alone during the day?

18. Where and for how long will the dog be kept during the day?

19. Where and for how long will the dog be kept during the night?

20. What are your plans for care for the dog when you are away overnight or on vacation?

21. How often do you travel for work?

22. How often do you travel for vacation without your dog?

23. Have you owned a dog before?

Yes No

If you have owned a dog(s) in the past, please list breed, age, how long owned, name of breeder, etc.)

24. Have ever adopted or fostered a rescue dog?

Yes No

25. Are you willing to provide emotional support to a rescue dog?

26. How long do you expect the transition process to take once a rescue dog is in your home?

27. How do you plan on transitioning a rescue dog into your home?

28. Do you currently have any other dogs living with you? If so, please specify breed, age, sex, and whether they are spayed or neutered.

29. How do you feel your current dog(s) will accept a new dog?

30. Other than the dog(s) listed above, do you have any other pets?

Yes No

If yes, please list type of pets:

31. How do you plan to introduce the rescue dog into your home? How will you introduce the rescue dog to your other animals, children, etc.?

32. Have you ever surrendered a dog to a rescue program, pound, shelter, or placed a dog you owned in another home?

Yes No

If yes, what were the circumstances of the placement(s)?

33. Is your home...?

Single family home

Townhouse/Condominium/Apartment

Farm or Large Acreage Home

Other

If other, please explain:

34. Do you own or rent your home?

Own Rent

If you rent, is your landlord in agreement with you having a large dog on the premises?

Yes No

Does your landlord have weight requirements?

Yes No

If yes, please explain:

35. Please describes all stairs in your home that the dog would have to navigate.

36. Do you allow pets on the furniture?

Yes No

37. Do you have a completely fenced in yard for the dog?

Yes, normal fence

Yes, invisible fence

No fence

38. Please describe all methods you will use to restrain a dog on your property. **Please include details on size, height, materials, relationship to house, etc.**

39. How do you plan to exercise the dog?

40. What activities do you enjoy doing with your dog?

41. Have you ever trained a pet?

Yes No

If yes, what methods have used? (i.e. clickers, choke collars, etc.)

Describe your house and behavior training experience:

42. How many and what types of trainers have you used in the past?

43. Of the dogs you own or have owned, what did you enjoy most about dog ownership?

44. Of the dogs you own or have owned, what did you enjoy least about dog ownership?
45. Where in your home do you spend time with your dog(s)? Do you sit on the floor with your dog(s)?
46. Would you ever move to a home that doesn't allow large dogs?
47. Under what circumstances would you ever consider surrendering a dog to a rescue group or shelter?
48. What are your interests and plans in providing your dog with good nutrition?
49. What food(s) do you generally feed?
50. If your dog has specialized nutritional needs, are you prepared to attend to these needs?
Yes No
51. What supplements do you/would you provide for your dog?
52. As Bernese Mountain Dogs age, they often need glucosamine/chondroitin supplements and fish oil and possibly others. Are you prepared to provide these types of supplements for an aging Bernese Mountain Dog?
Yes No
53. Please check any preferences you may have in a dog:
- Male
 - Female
 - Puppy
 - Adult
 - Purebred
 - Berner Mix

54. Would you be willing to adopt a BMD with special needs, i.e. older, needs surgery, needs medication, blind or deaf?

Yes No Maybe depending on the type of medical need

55. Would you be willing to adopt a BMD requiring special behavior training needs?

Yes No Maybe depending on the type of behavioral need

56. If yes, will you have time to attend training classes to achieve a rapport with a Rescue Dog, which will result in a successful placement?

Yes No

57. What behavior problems do you consider intolerable?

(Examples: Biting, growling, barking, house soiling, digging, etc.)

58. Are you prepared to spend \$500.00 or more a year on heartworm preventative, flea control and annual vaccination titers or vaccinations for a BMD?

Yes No

59. Are you prepared to deal with the cost, which often is more expensive due to the breeds' large size, of non-routine/emergency care, especially as the dog gets older?

Yes No

60. Are you willing to spend a half an hour every other day for regular grooming and more time during the spring and fall sheds or have the dog professionally groomed?

Yes No

61. May we visit your home and check references to verify the information you have provided?

Yes No

62. Are you interested in becoming a foster home before adopting?

Yes No

If yes, we will contact you separately about fostering.

63. For reference purposes, please provide the name, address, and phone number of vet you are currently established with or have used in the past.

Vet Name/Clinic:

Address:

Phone #:

Signature of Applicant

Date

Signature of Co-Applicant (spouse/partner)

Date

After you have completed the above questionnaire, please email CVBMDC Rescue at cvbmdcrescue@gmail.com. We will consider your email as your signature. We reserve the right to refuse an applicant.