



Puppy Socializer Application

First Name: _____ Last Name: _____

Physical Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

How did you learn about the JLAD program?

Word of mouth _____ Friend _____ Internet _____ Other _____

Why are you interested in becoming a volunteer puppy socializer?

JLAD requires the primary volunteer puppy socializer to be at least 18 years or older.

Are you at least 18 years of age? _____

In addition to you, who else will participate in raising the puppy?

Name: _____ Age: _____

Name: _____ Age: _____

Are there children living in your household?

How many? _____ What are their current ages? _____

JLAD requires that the assistance dog / puppy be the only puppy less than 12 months of age living in the household.

Please describe the other animals in your home:

Number of Dogs: _____

Breed: _____ Age: _____ Sex: _____ Spayed/Neutered: _____

Duration of Ownership: _____



Breed: _____ Age: ____ Sex: _____ Spayed/Neutered: _____

Duration of Ownership: _____

Number of Cats: _____

Breed: _____ Age: ____ Sex: _____ Spayed/Neutered: _____

Duration of Ownership: _____

Breed: _____ Age: ____ Sex: _____ Spayed/Neutered: _____

Duration of Ownership: _____

Number of Other Animals- _____

Breed: _____ Age: ____ Sex: _____ Spayed/Neutered: _____

Duration of Ownership: _____

Breed: _____ Age: ____ Sex: _____ Spayed/Neutered: _____

Duration of Ownership: _____

Please tell us about your home and yard. _____

JLAD requires volunteer puppy socializers to provide the necessities for raising a puppy which include food, water, bowls, shelter, bed, toys, collar, leash, treats, and lots, veterinary care if lack of supervision (i.e. puppy eats a sock and needs surgery), and lots of love, affection

Are you willing and able to provide for the above requirements while raising a puppy?
___ yes ___ no

JLAD requires volunteer puppy socializers to teach toilet training and house manners as well as attend weekly training classes and field trips.

Are you able to reliably attend weekly training classes and field trips with the puppy?
___ yes ___ no

As a puppy socializer you will need to provide the puppy with weekly socialization to several environments such as grocery stores, pharmacies, medical offices, restaurants, shopping malls, and if possible, your place of employment.

Are you able to include the puppy in weekly activities at least 3 hours per week?
___ yes ___ no



What are the aspects of your household routine, environment and lifestyle that will contribute to the puppy's socialization _____

Being a puppy socializer requires a good deal of physical stamina, which includes bending, stooping, lifting walking distances and repetitive motion.

Are you prepared to meet the above requirements?
 yes no

Being a puppy socializer requires patience, emotional control, the ability to learn new concepts and practices, the ability to receive constructive feedback and the ability to work positively within a team.

Are you prepared to meet the above requirements?
 yes no

What experience do you have that will contribute to your ability to meet the above requirements?

If you will be transporting the puppy in your private vehicle, JLAD Insurance requires that you provide proof of insurance.

Please include Drivers License State: _____ License Number: _____ Exp Date: _____
Insurance Provider (Required by our insurance): _____

Developing a bond and trust early in the puppy's life is a very important aspect in the success of our dogs. This human/animal bond and trust is critical to establish early and repeatedly throughout the puppy's life. We recognize that bonding is highly emotional and letting the puppy transition into another bonding relationship is even more so. How are you prepared to make this transition from the bond you have established to letting the puppy transition to next bonding experience?



Describe your current or past volunteer experience?

What was most rewarding about past volunteer experiences?

What was most challenging about past volunteer experiences?

Provide two personal/professional references who are prepared to speak to your ability to uphold a commitment and work within a team.

Name: _____ Relationship: _____

Telephone: _____ Email: _____

Name: _____ Relationship: _____

Telephone: _____ Email: _____

When could you start to foster the puppy? _____

Applicant Name

Applicant Signature

Date

Please return to:
The Joys of Living Assistance Dogs
PO Box 12023
Salem, OR 97309
