



CALIFORNIA CANINE ACADEMY  
ASSISTANCE DOGS  
5659 W. Brooks Road  
Merced, CA 95341  
209-723-2777

## Home Companion Dog

**Thank you for requesting** a home companion dog application. Our companion dogs are generally between one and two years of age. While they have learned their basic obedience skills and "house manners," companion dogs do not have the advanced skills of a full service dog. Additionally, the companion dog team is not afforded the rights of public access under the American with Disabilities Act, as is the full service dog team.

**Companion dogs spend their time in the home setting**, and generally provide unconditional love and therapeutic value for their recipients. Companion dogs are also placed as "Therapy" dogs with health care professionals by providing therapeutic benefits as needed by their client.

**There is a \$25 non-refundable processing fee that must be included with the application.** After we receive your completed application we will meet with you for an interview. If accepted into the program, your name will be placed on our waiting list until a dog is matched with you.

**Once the dog is placed, your responsibilities** will include completing a written report every year, keeping veterinary care current, and ensuring the dog is in a loving and caring environment. If your animal has not been spayed/neutered, you must do this within 30 days of receiving the animal and must send us a copy of the vet documentation showing such. We do ask for a \$600 donation at time of placement.

Thank you again for your interest. Please feel free to call us at 209-723-2777 if you have any questions.

Please initial when read \_\_\_\_\_



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THErapy / HOME COMPANION DOG APPLICATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Are you completing this application on behalf of someone else?  yes  no

If yes, please state your relation to the person who desires the companion dog: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (W) \_\_\_\_\_

\_\_\_\_\_ (H) \_\_\_\_\_

County \_\_\_\_\_

Birthdate: \_\_\_\_\_ SS# \_\_\_\_\_

E-Mail: \_\_\_\_\_ Are you under the age of 18?  yes  no

Do you have any disability that would impair your ability to take care of the dog?  yes  no

If you have a disability that deteriorates your health, who will take responsibility for the dog's care and are they willing to do so for the lifetime of the dog?

\_\_\_\_\_

Do you have a caregiver?  yes  no

Are there any other animals in your home?  yes  no

If yes, please list type, breed and ages: \_\_\_\_\_

\_\_\_\_\_

Can you be financially responsible for the lifetime of this dog's care?  yes  no

Please list all the people residing in your home and their ages: \_\_\_\_\_

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Do you own or rent your home?  own  rent If renting, does the landlord allow pets?  yes  no

Include a copy of your rental agreement showing that the landlord allows pets or letter from the landlord.

Have you ever owned a dog?  yes  no If yes when: \_\_\_\_\_

Did you train it yourself or other? \_\_\_\_\_

In order to select an appropriate canine companion for you we ask that you complete the following questions with as much information as you feel is necessary for us to get to know you.

Please describe your home/family and general schedule (i.e. how long will the dog be left home alone):

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Do you have a fenced in yard?  yes  no How high is the fence? \_\_\_\_\_

What type?  chainlink  wood  other \_\_\_\_\_

If no fenced yard, are you willing to always walk the dog on a leash at least twice a day for at least 30 minutes?  yes  no

Approximately what percentage of the day are you away from home? \_\_\_\_\_

Do you travel? \_\_\_\_\_ Where and how often? \_\_\_\_\_

Will you bring the dog with you when you travel?  yes  no

If not, where will you leave the dog? \_\_\_\_\_

How did you find out about California Canine Academy / Assistance Dogs? \_\_\_\_\_

**Please include a photo of applicant**

Please have a local vet of your choice send us a letter saying that they will be caring for the dog's health and will cooperate with California Canine Academy / Assistance Dogs follow up when we ask for the dog's records. We will make arrangements to have the dog's health history sent to your vet. (This letter does not need to be sent with the application but will be necessary before proceeding after initial interview.)

**Please Complete Essays on a Separate Piece of Paper**

**Description of Recipient Essay:**

The purpose of this essay is to enable California Canine Academy / Assistance Dogs to understand your physical traits, lifestyle, disability, activities and personality. Through a detailed description of yourself, your home, your family and your activities, we can better establish the type of dog most suited for you. Describe your ideal companion dog. Please be as precise and comprehensive as possible!

**Please read the following paragraph carefully:**

I understand the term “companion dog” refers to a dog that has been trained in basic obedience skills and that while the companion dog has learned “house manners”, he/she has not received the more advanced training of a full service dog. Unlike the full service do/recipient team, in accordance with the Americans With Disabilities Act, the companion/recipient team does not have public access rights. Under no circumstances is the companion dog allowed to go into any public facility where pets are not routinely allowed unless given special permission. In no way is the companion dog to be represented as a full service dog.

Please have all adults residing in household sign below to acknowledge that each understands the term “companion dog”, and understands and agrees to follow the public access guidelines as noted above.

Name \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_