

# FERRET ADOPTION APPLICATION

This application includes questions on how to care for pocket pets. Be sure to do lots of research on the species you are looking to adopt before you fill out this form. Please note that errors are often encountered when filling this form out from a cell phone or tablet. For best results, please fill out from a computer; Chrome browser recommended. Please allow at least three business days for a response to your application, MNPPR is a 100% volunteer-run rescue and your patience is appreciated. Please note, the distance from the foster to adopter's location is taken into consideration when approving Critter Courtships. For all other adoptions, we will only consider applicants from the following states: Minnesota, Iowa, North Dakota, South Dakota, and Wisconsin. Please also note that we are not able to proceed with applications that are for classroom or store pets.

\* Indicates required question

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1. First things first - please read over our adoption process: <http://www.mnpocketpetrescue.org/process> \*

*Mark only one oval.*

- I've read the process and I understand.
- I've read the process and I need more explanation.

2. Your name: \*

First and last.

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3. Your Personal Pronouns:

We would like to provide a safe and inclusive space for all. Please let us know how to best address you. (She/her; he/him; they/them; etc.)

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4. Your address: \*

Street Address (ex: 1234 Frost Ave)

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5. Your City: \*

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6. Your State & Zip Code: \*

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7. Your email: \*

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8. Your phone: \*

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9. Please select your age range: \*

If you are under 18, we will require a legal guardian's email address so that they can be involved in the adoption process.

*Mark only one oval.*

13 - 18

18+

10. Are you a guardian adopting this pet for a child?

If yes, please list child's name, age and experience with animals as well as why you want to adopt this animal for the child.

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## HOUSING

11. What type of housing do you live in? \*

*Mark only one oval.*

Apartment

Single family home

Condo

Other: \_\_\_\_\_

12. How long have you lived at this address? \*

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13. Do you rent or own? \*

Mark only one oval.

- Rent
- Own
- Other: \_\_\_\_\_

14. If renting, does your landlord allow pets?

Mark only one oval.

- Yes.
- No.
- Not sure.
- Other: \_\_\_\_\_

15. Your landlord's info:

Name (first and last), phone number, and email address. If you rent you MUST provide your landlord's information to us or you will not be approved to adopt.

\_\_\_\_\_

16. Some cities have restrictions on number and species of pets you can own. Do you know what your local laws are regarding this? \*

Mark only one oval.

- Yes.
- No.
- Not sure.
- Other: \_\_\_\_\_

17. Do you have anyone living with you who is not already listed as an applicant? \*

Check all that apply.

- Significant other
- Children
- Other family
- Roommate(s)
- None
- Other: \_\_\_\_\_

18. If you marked that you have children, please provide their ages.

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19. If you marked that you are living with other people, please provide their names, relationships, and email addresses.

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20. Is everyone living with you in agreement that your household would like to add new pets to the home? \*

*Mark only one oval.*

Yes.

No.

Not sure.

Other: \_\_\_\_\_

21. What temperature regulating systems do you have in your home? \*

Please check all that apply. Most pocket pets must be kept within certain temperatures in order to prevent death, illness and/or hibernation.

*Check all that apply.*

Heating system (you can regulate temperature)

Heating system (you CANNOT regulate temperature)

Central air (you can regulate temperature)

Central air (you CANNOT regulate temperature)

Window unit AC

Fans

Space heater

Other: \_\_\_\_\_

22. How much space are you able to dedicate to your new pets' habitat? \*

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## YOUR PETS

23. Have you adopted from us before? \*

*Mark only one oval.*

Yes

No

24. Do you currently have any pets? \*

*Check all that apply.*

- Dogs
- Cats
- Pocket pets
- Reptiles
- Birds
- No pets
- Other: \_\_\_\_\_

25. Tell us the names, ages, sex and species/breeds of your current pets:

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26. If you have cats, dogs, rabbits or ferrets - are they spayed/neutered?

*Mark only one oval.*

- Yes.
- No.
- Not sure.
- Other: \_\_\_\_\_

27. If you have dogs, cats, rabbits or ferrets - are they up to date on their vaccines?

*Mark only one oval.*

- Yes.
- No.
- Not sure.
- Other: \_\_\_\_\_

28. Have your current pets been exposed to pocket pets before? If so, what kinds and how did they react?

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29. Please list previous pets: \*

Name, species/breed, ages, and where are they now.

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30. What vet clinic(s) do you take your pets to? \*

Please provide the information (clinic name and contact info) for your current vet. If you do not have a current vet, please indicate so. We will be contacting your listed vet to confirm that your pets are up to date on wellness exams and vaccines. If your pets are listed under a different name at your vet clinic, please provide the name that your pets are listed under.

\*Please note that we do require that ALL current pets in the household are regularly seen by a vet. If you have pets that are not up to date on vaccines or wellness exams, we will request that you make an appointment with a vet before we are able to begin processing your application.

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## YOUR NEW PET

31. Name of pet (or pets) you would like to adopt: \*

Since we are a foster home based organization, the best place to learn about our pets is on our website on their individual profiles. If you have any questions about a specific pet, let us know and we can reach out to the foster parent.

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32. If the pet you would like to adopt is unavailable, is there another pet you'd be interested in? Please list all possibilities.

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What species are you looking to adopt? \*

Mark only one oval.

- Chinchilla
- Degu
- Ferret
- Gerbil
- Guinea Pig
- Hamster
- Hedgehog
- Mouse
- Rabbit
- Rat
- Sugar Glider

## FERRET QUESTIONS

Please answer the following care questions regarding the care of the species you are applying to adopt. You can check out our care guides [here](#). Incorrect answers will NOT disqualify you from adopting! These questions are about knowledge and learning so that animals in our rescue are given the best care possible! A member of our Adoption Team will review your answers and reach out to you with any feedback and to answer any questions you may have.

*All information shared by MN Pocket Pet Rescue is researched, up to date, and accurate to the best of our ability. We are not a licensed veterinary organization and do not intend to present ourselves as such. All educational material contains our best recommendations for care specific to each species. However, all animals are different and some may have unique needs. MN Pocket Pet Rescue does not assume any liability for the well-being of any animal not under our care. Always use your best judgment and follow veterinary recommendations whenever necessary. If you have any questions or find inaccurate information please contact us.*

Why do you want to adopt a ferret? \*

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What is your experience level with ferrets? \*

*Check all that apply.*

- I currently own them.
- I have owned them in the past.
- I currently or have owned them in the past but only for a short period of time.
- I have pet sat them before.
- I know people who own ferrets and have interacted with the animals extensively.
- I know people who own ferrets but have not interacted with the animals very much.
- I have no experience with ferrets.
- Other: \_\_\_\_\_

Please describe the habitat that you are planning on housing your new ferret(s) in. If you would like our recommendation on what habitat you should get, please indicate so. \*

Describe with measurements in inches (length, width, depth, height). Include bar spacing in inches if applicable. If you know the brand/model of the cage, please indicate.

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If you will be introducing this new ferret to be housed with others, do you have a temporary cage you can keep it in during the bonding process?

*Mark only one oval.*

Yes.

No.

No, I would like recommendations.

Other: \_\_\_\_\_

If you will be introducing this new ferret to be housed with others, how do you plan on doing so?

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How much time are you able to dedicate to letting your ferret out of their cage each day for exercise and play? \*

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Are you committed to cleaning your pets' cage/litter box at minimum once a week? \*

We recommend spot cleaning litter boxes daily when possible.

*Mark only one oval.*

Yes.

No.

Other: \_\_\_\_\_



Please select the types of litter/bedding that are safe for ferrets: \*

*Check all that apply.*

- Shredded paper
- CareFresh
- Towels
- Fleece
- Paper pellets (unscented)
- Clay kitty litter
- Wheat kitty litter
- Cedar
- Pine
- Aspen
- Paper towels
- Other: \_\_\_\_\_

What is the best diet for ferrets? \*

Check all that apply.

*Check all that apply.*

- Ferret food
- High quality cat food
- High quality kitten food
- Rodent food
- High quality dog food
- Raw meat
- Other: \_\_\_\_\_

Select all the supplies required for ferret care. \*

*Check all that apply.*

- Shelter/hide (igloo, box, etc)
- Hammocks
- Water bottle
- Wheel
- Food dish
- Hay
- Chew toys
- Ramps/levels
- Dust bath
- Tubes/tunnels
- Exercise ball
- Bed
- Enrichment toys
- Unscented soft recycled paper, shredded paper, or paper pellets
- Fleece
- Litter box
- Pet carrier
- High-quality ferret food
- Dog food

What signs and symptoms should be watched for in ferrets to tell if they are ill or injured? \*

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What vaccines do ferrets require? \*

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Ferrets live to be 8 - 10 years old. Are you prepared to care for your pets for their entire lifespan? \*

*Mark only one oval.*

- Yes.
- No.
- Not sure.
- Other: \_\_\_\_\_

Since ferrets are communal animals and will be happiest when living with other ferrets, are you prepared to adopt another ferret when a cagemate passes away? \*

*Mark only one oval.*

- Yes
- No

## FINAL QUESTIONS

What do you plan to do if you develop an allergy to your new pet(s)? \*

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What behaviors are you unwilling to work with? \*

*Check all that apply.*

- Nipping/mouthiness
- Biting (hard)
- Excessive chewing
- Intolerance of being picked up
- Intolerance of being held
- Shyness
- Urine marking
- Not litter box trained
- Not getting along with other animals it is to be housed in the same cage with
- Not getting along with other animals in the home
- None
- Other: \_\_\_\_\_

Are you prepared for an extended adjustment period for you, your new pet(s) and your current pets?

Pocket pets are very sensitive creatures and being moved to different homes can be extremely stressful for them. It will take some time for them to adjust to their surroundings before they come out of their shell or let you handle them. Check out our page on bonding for tips: <https://www.mnpocketpetrescue.org/bonding>

Mark only one oval.

- Yes.
- No.
- Not sure.
- Other: \_\_\_\_\_

What circumstances would require you to return this pet? \*

\_\_\_\_\_

What will you do with your new pet(s) if you go out of town? \*

Mark only one oval.

- I have a friend or family member who is comfortable and willing to care for this species.
- I have a pet sitter that I use for my other pets who is comfortable caring for this species.
- I will need a recommendation for a pet sitter.
- Other: \_\_\_\_\_

What vet do you plan to take your new pet(s) to? \*

Clinic name and contact info. Be sure your vet sees this species! Please indicate if you need a recommendation.

\_\_\_\_\_

Are you willing to provide your new pet(s) with all necessary vet care for the duration of its life? \*

\_\_\_\_\_

Do you agree to never house unaltered, opposite sex pocket pets together? \*

\_\_\_\_\_

Do you agree to return this pet to MN Pocket Pet Rescue if for any reason you are unable to keep it? \*

\_\_\_\_\_

How did you hear about us? \*

Mark only one oval.

- Facebook
- Petfinder
- Adopt A Pet
- Instagram
- Twitter
- Our website ([www.mnpocketpetrescue.org](http://www.mnpocketpetrescue.org))
- Other: \_\_\_\_\_

## REFERENCES

Reference 1 \*

Name (first and last), length of time known, relationship, email address, phone number.

\_\_\_\_\_

Reference 2 \*

Name (first and last), length of time known, relationship, email address, phone number.

\_\_\_\_\_

Reference 3 \*

Name (first and last), length of time known, relationship, email address, phone number.

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## SUBMIT FORM

By choosing "I Agree" you are agreeing that MN Pocket Pet Rescue may contact your veterinarian, references, and housemates to ascertain your history regarding pet care and consistency. This application does not guarantee approval. Any deliberate false statements provided during the application process will result in an automatic denial. Please note that email is MNPPR's primary method of contact. Failure to respond to emails in a timely manner (within 72 hours) will result in denial of your application. Either the Adoption Manager (Cassidy) or the Adoption Correspondent (Jessica) will contact you within 7 days of your application submission.

By selecting "I Agree" you hereby certify that the information provided by you in this application is true and correct. \*

Mark only one oval.

- I agree.
- I do not agree.