



Dear Applicant,

Please return your completed application to admin@roverchasefoundation.org, by mail, or in person at:

224 Commerce Parkway
Pelham, Alabama 35124

Application Process:

Step 1: Complete and return the application package. A list of package components can be found on the final page.

Step 2: Once we have your completed application on file, we will conduct a phone interview.

Step 3: Once the phone interview is completed, a facility visit will be scheduled and conducted.

Step 4: Once you have completed your facility visit, application, and phone interview, your file will be sent to our application committee for a final review. If approved, you will be contacted for an in-person interview where we will discuss wait times and procedures moving forward.

Note: The Roverchase Foundation Reserves the right at any point in the process and at our sole discretion to not place a facility if we feel the placement would not be beneficial. If you have any questions, please contact admin@roverchasefoundation.org.

I acknowledge that The Roverchase Foundation reserves the right in its sole discretion to not place a facility dog with me (or my organization) if it feels the placement would not be beneficial.

Applicant's Name (printed): _____

State: _____

Applicant or Legal Guardian (signature): _____

Date: _____

Note: Our waiting list can be long and the wait may be lengthy. Being on our waitlist does not guarantee that we will receive a dog from The Roverchase Foundation. IN ORDER TO KEEP YOUR FILE ACTIVE, YOU MUST CONTACT THE ROVERCHASE FOUNDATION STAFF EMAIL OR MAIL EVERY 30 DAYS.

I understand that I must stay in contact every 30 days via email or mail to keep my file active.

Applicant's Name (printed): _____

State: _____

Applicant or Legal Guardian (signature): _____

Date: _____

Applicant for Facility Dog

Date: _____

Name of Facility: _____

Name of Designated Handler of Dog for Facility: _____

Address of Facility: _____

City: _____ County: _____ State: _____ Zip: _____

Phone: _____ Cell _____

Work: _____ Email: _____

Director of Facility: _____ Email of Director: _____

Phone Number for Director: _____

How did you hear about our organization? _____

If the Facility is not in a city, please tell us the closest city to you and where it is.

Is the facility a non profit organization, school, or government agency?

Nonprofit Public School Governmental Agency Business Facility Private Facility

What is the name/purpose of your organization/facility?

Describe the People that you serve:

Ages: _____

Family Income (Low, Medium, High): _____

Races: _____

Do you serve veterans? _____

Do you serve first responders? _____

Do you serve students? _____

How many people do you serve each month? _____

What is the physical capacity of your facility population? _____

(More information may be requested at a later date)

In what ways do you think a working facility dog would/will improve your facility/facility outcomes?

Any Existing Animals at Facility:

Name: _____ Location: _____ Breed: _____

Name: _____ Location: _____ Breed: _____

Name: _____ Location: _____ Breed: _____

Name: _____ Location: _____ Breed: _____

Veterinarian Name (if you have one for existing dogs/pets): _____

Telephone number: _____

Address: _____

The Handler and Facility, _____, agree to allow The Roverchase Foundation, LLC, to use photos (when possible) and success stories about working with a Facility Dog.

The Roverchase Foundation, LLC, requires that a full time staff member of the facility, _____, be the handler for the facility dog. The dog will live with them and they will be the primary caregiver. We also recommend that more than one individual from the facility be trained in the handling of your facility dog to allow for maximum exposure of the dog to your population and in the case of emergency situations.

Primary Handler Staff Member Information

Name of Handler: _____

What is your position in the Facility in which the dog will work? _____

How long have you worked at this facility? _____

Address of Handler: _____

Telephone Number for Handler (Home, Work, Cell): _____

Marital Status: ___ Single ___ Married ___ Divorced ___ Other: _____

Do you have other pets in the home? (If yes, please list type, breed(s) and ages, spayed or neutered)
(Pets in home will be required to go through a temperament evaluation at our facility)

Name: _____ Age: _____ Breed: _____ S/N

Name: _____ Age: _____ Breed: _____ S/N

Name: _____ Age: _____ Breed: _____ S/N

Name: _____ Age: _____ Breed: _____ S/N

Describe your typical work day: _____

Who will assist in the daily care and training of your dog? _____

Does anyone in your household have concerns about having a facility dog such as allergies, fleas, shedding etc. in their home? If so, please describe: _____

Please list any concerns your family may have about caring for a Facility dog?

A handler must provide a safe home environment for the dog. Are you willing to make necessary changes in your home to make it safe? ___ Yes ___ No

Please list all individuals living in your home with you:

Name:	Relationship to you:	Age:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The Roverchase Foundation Facility Dogs, and all Facility dogs, **DO NOT** have public access rights except for the location for which they are assigned. Facility dogs are never to be allowed in public restaurants or in grocery stores. They are not allowed to travel on public transportation. If you have any questions or concerns about where your facility dog is allowed to travel, feel free to contact us at admin@theroverchasefoundation.org.

THE DOG'S VEST MUST BE REMOVED WHEN NOT ON OFFICIAL WORK-RELATED BUSINESS.

The handler agrees to attend scheduled training sessions and maintenance training and evaluation of your facility dog.

Date: _____ Signature: _____

Required Training and Evaluation: [NEED]

Authorized Facility Personnel: _____ Date: _____

Authorized Signature: _____ Date: _____

Handler: _____ Date: _____

Handler Signature: _____ Date: _____

Application Checklist

- Completed application form with your signature on the last page
- A short autobiography and picture