



Homeschooling through Bond-Based Alliance Application

Name of Applicant: _____ Date: _____

Name of Parent(s): _____
(If living with applicant)

Email: _____ Phone: _____

Address: _____

Applicant DOB: _____ Applicant Gender: _____

Do you currently have a dog? _____ Dog's Age: _____ Dog's Weight: _____

Dog's Breed: _____

For the following set of questions, circle the options that best describe your dog.

My dog is:

Often Fearful Sometimes Fearful Somewhat Confident Mostly Confident

Very Anxious Somewhat Anxious Slightly Anxious Rarely Anxious

Rarely Communicative Sometimes Communicative Always Communicative

Clingy Can Function Independently Completely Independent

Very Calm Somewhat Calm Somewhat Energetic Highly Energetic

Inattentive Sometimes Attentive Mostly Attentive Always Attentive

Other ways you would describe your dog: _____

Circle all actions below that you would not allow a pet dog to do:

lick your face bark at another dog in your neighborhood lick themselves
mount another dog get on the furniture watch you eat eat before you eat
sleep in your bed walk in your neighborhood off leash get food off the counter

Circle all actions below you would be not be willing to do with your dog:

allow your dog to make certain decisions of his/her own use a choke chain
talk to your dog in public scold your dog massage your dog
scare your dog in an effort to prevent misbehavior swat your dog
force your dog to do something that assist you but makes him/her uncomfortable
consider what your dog is trying to tell you when he/she doesn't comply with a request

Circle your answers to the questions below:

It is okay for people to use animals as they see fit

Strongly Agree Agree Disagree Strongly Disagree

Explain your answer _____

Pets are family members and should be treated as such

Strongly Agree Agree Disagree Strongly Disagree

Dogs are thinking beings

Strongly Agree Agree Disagree Strongly Disagree

Dogs are emotional beings

Strongly Agree Agree Disagree Strongly Disagree

Please rate your dog's comfort level with the following:

1 = very uncomfortable

5 = completely comfortable

Loud noises: 1 2 3 4 5

High pitched noises: 1 2 3 4 5

Thunder: 1 2 3 4 5

Strangers: 1 2 3 4 5

Children: 1 2 3 4 5

Toddlers: 1 2 3 4 5

Statues: 1 2 3 4 5

Unfamiliar objects: 1 2 3 4 5

Unfamiliar dogs: 1 2 3 4 5

Other animals: 1 2 3 4 5

Unfamiliar Situations: 1 2 3 4 5

Please describe any circumstance in which your dog is likely to bark:

What is the applicant's primary disability?

Please list any secondary disabilities:

In what ways would you like your dog to help you _____

Circle any of the following aids or devices you use:

Prosthesis Leg Brace Crutch/Cane Manual Wheelchair

Power Wheelchair Wrist Brace Hearing Aid Walker

Other _____

Please list the names and ages of anyone who lives with the applicant as well as their relationship to the applicant.

Does the applicant have an attendant? _____

Who will assist in care for/teaching your dog? _____

How much time in a day could be devoted directly to your dog? _____

Anything else we should know about you or your dog _____

Signature of Applicant or Parent (If applicant is under 18 years of age)

Please submit to Lindsey.Hall@CanineAssistants.org