



Team Trainers Rescue Group
4815 Orchard Road
Garfield Heights OH 44128

Who Recommended Team Trainers Rescue Group?
Trainer Name: _____

APPLICATION FOR FINANCIAL ASSISTANCE FOR DOG TRAINING

By completing this application, you will aid us in determining if you and your family may qualify for assistance in personalized dog training for your adopted or rescued pet. Team Trainers to the rescue knows that pet ownership is a financial responsibility.

We review applications to see how we may assist financial aid in securing the best training possible through Lorenzo's Dog Training team, keeping dogs out of shelters and in happy homes.

GENERAL INFORMATION:

Name: _____ Age: __ Under 30 __ Under 50 __ Over 50 __
Spouse: _____
Street Address: _____ Phone: _____
City: _____ Alt Phone: _____
State: _____ Zip Code _____ Email: _____

INCOME:

Primary Monthly Earnings: _____ Average Monthly Expenses: _____
Occupation: _____
Secondary Monthly Earnings If Any: _____ Any Other Monthly Income: _____

ATTACH COPIES OF THE LAST TWO PAYMENT STUBS FROM ALL SOURCES OF INCOME.

Note: Proof of Income is only used to base the greatest percentage of assistance possible.

HOUSING:

Please check all that may apply. Yard: Yes ___ No ___
Own ___ Rent ___ Other ___
If other please define: _____ If Yard: Fenced ___ Yes ___ No

Please explain below, if there are any special housing exceptions that we may need to be aware of in processing your application for assistance.



Monthly Expense Worksheet		
Items	Amount	Notes
INCOME		
Income Total	\$	
Other Income	\$	
EXPENSES		
	\$	
Mortgage/Rent	\$	
Electric	\$	
Water/Sewer	\$	
Gas	\$	
Trash	\$	
Phone/Cable	\$	
Credit Card/Debt	\$	
Groceries	\$	
Car Payment	\$	
Auto Insurance	\$	
Loans	\$	
Totals	\$	

ANIMAL COMPANIONS:

If you presently have or had dogs in the past, please complete the information below. For spay and neutered please just write "Y" or "N" only in the altered column. In column labeled "Yrs" provide the years your pet has been under your care. List in column "Origin one of the following options; breeder, stray, rescue, gift or inherited.

Current Dogs - Name	Age	Sex	Altered	Yrs.	Origin

To help us better please include any prior pets and the reason for separation below. We of course understand a loss of any pet due to a variety of situations often is disheartening. To make it less stressful list just one of the following reasons – Pet Loss, Living Situation, Financial or Behavioral Issues.

Previous Dogs - Name	Age	Sex	Yrs.	Reason For Separation

Finally – Have you ever trained a dog in obedience classes Yes ___ or No ___.

Please list any other types of pets below if any:

Species	Total	Age	Habitat	Reason For Separation

YOUR NEW DOG:

Who will be responsible for his or her care? _____.

What was the primary reason for bringing your dog into the home? _____

Will your dog be inside, outside or both? _____.

How many hours per day will your dog be left alone? _____.

Where will your dog be kept when left alone? _____.

Please explain below any behavioral issues or special needs to be addressed in training if any in the section below.

REFERANCES:

Please provide us with the following references:

Veterinarian (if you have one currently)

Name _____

Address _____

Telephone No. _____

Relative

Name _____

Telephone No. _____

Friend

Name _____

Telephone No. _____

PLEASE ACKNOWLEDGE THE FOLLOWING:

All of the information you have provided in this application is true and correct. If any information changes you will inform Team Trainers to the Rescue promptly.

Name: _____ **Date:** _____

Print Name: _____

Email Application to: TeamTrainersRescue@Gmail.com

OFFICE USE: Approval: Y / N Date: _____ Processor _____