

# Owner Surrender Dog Profile



The following animal profile will give us a better understanding of your dog's behavior in certain situations. By answering these questions you can help us place him/ her with the best new family.

Please be open and honest with your answers and provide as much information as possible. If you require more room for answers, please write on back of this page.

This profile does not guarantee that your pet will go into the adoption program.

By signing below, I certify that the information I am about to provide is accurate and truthful to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Animal ID# \_\_\_\_\_

Front Desk Initials \_\_\_\_\_

E-room Initials \_\_\_\_\_

**BASIC INFORMATION**

1. Why are you surrendering this dog? \_\_\_\_\_
2. How long has dog lived with you? \_\_\_\_\_ years How many owners has this dog had? \_\_\_\_\_
3. Share three things you like about your dog and want others to know
  - a. \_\_\_\_\_
  - b. \_\_\_\_\_
  - c. \_\_\_\_\_

**MEDICAL INFORMATION**

1. Does your dog have any special medical or dietary needs? (Special diets, ongoing medication, etc.) NO YES  
Explain \_\_\_\_\_
2. Does your dog have any previous health issues or injuries? (Surgeries, Seizures, Old Fractures, Allergies, etc.) NO YES  
Explain \_\_\_\_\_
3. Has dog been spayed/neutered NO NOT SURE YES List approximate date \_\_\_\_\_

**BEHAVIOR INFORMATION**

1. Has your dog ever bitten a person? NO YES How many people has s/he bitten? \_\_\_\_\_
  - a. If yes, did dog draw blood? NO YES If no, did dog leave mark or bruise? NO YES
  - b. Who was bitten, how long ago, why and where was bite located? \_\_\_\_\_
2. Are there any situations or items that cause your dog to growl, snarl, bark, lunge, snap or otherwise act aggressively towards people? YES NO Circle all that apply.
 

Food	Toys	Restraint	Bones/Rawhide	Stolen Objects	Hugging/Kissing
Disturbed When Sleeping		Stranger Entering Home/Yard		Ear Cleaning	
Reaching For Dog Or Grabbing Collar	Brushing/Bathing	Nail Trimming	Other		

 List severity of behavior for each situation circled and your response \_\_\_\_\_
3. Has dog ever attacked/killed another animal? NO YES Type of animal, severity of bite, when and why it occurred? \_\_\_\_\_
4. Are there situations/items that cause your dog to growl, snarl, bark, lunge, snap or otherwise act aggressively toward other dogs? NO YES Circle all that apply
 

Food	Toys	Bones/Rawhide	Stolen Objects	Dog Park
Attention From Owner	Dog Entering Home/Yard	Up On Furniture/Bed		
Dog Coming Too Close On Walk		Other		

 List severity of behavior for each situation circled and your response \_\_\_\_\_
5. Has your dog ever visited homes with dogs? NO YES Dog Parks? NO YES
6. If your dog does not go to dog parks or visit homes with dogs, are there any dog friends he plays with on a regular basis? NO YES Explain \_\_\_\_\_

**HOUSEHOLD INFORMATION**

1. How many children under 18 has your dog lived with or regularly visited your home? \_\_\_\_\_ Ages \_\_\_\_\_
  - a. How did they interact? \_\_\_\_\_

2. What other animals did your dog live with? \_\_\_\_\_  
 a. How did they interact? \_\_\_\_\_

Does your dog have accidents in the house? NO YES How often \_\_\_\_\_

- a. When and where does s/he house soil \_\_\_\_\_

3. Do you take your dog outside to go to the bathroom? NO YES How often \_\_\_\_\_

4. When playing with your dog does s/he do any of the following? Circle all that apply

Jumps Growls (Play) Barks (Play) Mouths Hands or Clothes Bites (Leaves Marks) None Of These

5. Please list things your dog is afraid of \_\_\_\_\_

6. Is your dog allowed on furniture? YES NO

7. Where does your dog sleep? \_\_\_\_\_

8. Does your dog enjoy car rides? YES NO GETS CAR SICK

9. Does your dog escape from the yard or house? NO YES

a. How often, when and how does he escape? \_\_\_\_\_

b. If your yard is fenced list type of fence and approximate height \_\_\_\_\_

10. Does your dog live Inside Outside Both Explain \_\_\_\_\_

11. On average, how many hours a day does your dog spend alone? \_\_\_\_\_

12. Where do you leave your dog when no one is home?

Outside Free Inside Confined To a Room In a Crate Other \_\_\_\_\_

### DOG INFORMATION

1. Circle all of the words that describe your dog's personality

Calm Friendly Energetic Independent Playful Fearful/Shy Anxious Confident Aggressive

2. When left alone, does your dog do any of the following? Circle all that apply

Destroy Household Items Urinate/Defecate Bark Constantly Cry/Whine Howl Constantly

Breaks out of Crate/Kennel Chew/Scratch under or Around Doors and Windows None of These

a. How frequently does he do these behaviors \_\_\_\_\_

b. Does it matter how long you are gone NO YES Explain \_\_\_\_\_

3. What are your dog's favorite toys and games? \_\_\_\_\_

4. Does your dog know any commands or tricks? Please list \_\_\_\_\_

5. What one thing would you like to change about your dog? \_\_\_\_\_

6. Is there anything else you would like to share about your dog? \_\_\_\_\_

### Select the level of exercise that best describes what your pet requires/prefers:

\_\_\_ Low: Spends most of day sleeping or resting, wants occasional walks or playtimes

\_\_\_ Mild: Likes to play for a while or take a few short walks and then will rest or relax

\_\_\_ Moderate: Needs multiple medium to long walks each day or longer amounts of playtime/fetch

\_\_\_ High: Needs regular jogs/runs or sports activities like Frisbee/Agility/Fly Ball

**Thank you for your open and honest answers. Please let the desk staff know if you would like to help the many homeless animals in our care by making a donation: \_\_\_\$10 \_\_\_\$25 \_\_\_Other**