Surrendered Dog Information

Animal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Pet Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Spayed/Neutered ? Y N

**€ I want to be notified if the Placer SPCA is unable to place this animal for adoption.**

 (There is a **$50 non-refundable fee** for this service)

 I understand that I **must respond or redeem** within 24 hours of this notice and will only be called at the

 numbers I provide on the **Animal Receipt**. (Please Initial) \_\_\_\_\_\_\_\_\_

**Please check the behaviors that might apply to this dog & complete the following questionnaire:**

|  |  |  |  |
| --- | --- | --- | --- |
| € Eager to please | € Comes when called  | € Submissive | € Snappy |
| € Friendly | € Confident | € Reserved | € Predatory |
| € Well mannered | € Independent | € Timid | € Destructive |
| € Demanding | € Jumps up | € Mouthy | € Defensive/Protective |
| € Vocal | € Lap dog | € Sensitive to noise | € Escape oriented |
| € Stubborn | € Outgoing | € Pushy | € Attacks/bites people |
| € Doesn’t obey | € Digs | € Shy | € Attacks other dogs |

If you have checked a box in the gray area, please explain thoroughly:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Has this dog bitten or seriously scratched anyone (*broken skin*) in the last 15 days?** 🞎 Yes 🞎 No

If **yes,** explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does this animal have history with any animal control agency? 🞎 Yes 🞎 No

If **yes**, with what agency and for what? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does this dog have any special needs? 🞎 Yes 🞎 No

If yes, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many people in your family? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Children’s ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Why are you giving up this dog? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where did you get this dog? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 How long ago?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

History of previous ownership of dog: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Housing Information** *please check all that apply*

Dog is kept when family is home?

🞎 Inside with run of the house 🞎 Inside/Outside dog door

🞎 Inside restricted from areas of the house 🞎 Outside and garage

🞎 Inside crated 🞎 Outside in back yard

Dog is kept when family is not home?

🞎 Inside with run of the house 🞎 Inside/Outside dog door

🞎 Inside restricted from areas of the house 🞎 Outside and garage

🞎 Inside crated 🞎 Outside in back yard

When outside, how is this dog confined?

* No confinement, dog is allowed to run loose
* Fenced yard: Fence height:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fence Type:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Fenced run: Fence height:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fence Type:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Garage or other outside building 🞎 Kennel 🞎 Tethered by chain or cable
* Overhead zip line 🞎 Ground zip line 🞎 Invisible electronic fence
* Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If this dog is kept in a fenced yard or run, how does it behave?

🞎 Rests 🞎 Plays 🞎 Paces 🞎 Chews 🞎 Whines 🞎 Howls 🞎 Digs

🞎 Tries to escape: 🞎 Digs under 🞎 Jumps over

🞎 Barks: At what? 🞎 Other:

When in a fenced yard or run, this dog is *friendly* with:

 🞎 Family members 🞎 Visitors 🞎 Strangers

 When in a fenced yard or run, this dog is *unfriendly* with:

 🞎 Family members 🞎 Visitors 🞎 Strangers

If the dog escapes, where does it go?

Why does it go there?

How have you gotten it back?

Is this dog restricted to / from any areas? 🞎 Yes 🞎 No

Please explain:

Where does this dog sleep?

🞎 Inside: Where? On what? With whom?

🞎 Outside: Where? On what? With whom?

# Housetraining Information *Please check all that apply*

Is this dog housetrained? 🞎 Yes 🞎 No

When does this dog have accidents?

* This dog has frequent accidents, even when people are home
* This dog only has accidents when left alone over (length of time)
* This dog has occasional accidents

Accidents are: 🞎 Urination only 🞎 Bowel movements only 🞎 Both

Where does this dog go potty?

🞎 Newspaper 🞎 Pads or similar product 🞎 Litter box 🞎 Walks

🞎 Yard: 🞎 Through dog door 🞎 Let out by person 🞎 Other access:

🞎 Other:

How do you know when this dog needs to go potty?

🞎 Goes to the door 🞎 Barks 🞎 Paces 🞎 Scheduled walks

🞎 Lets him/herself out through dog door 🞎 Tells you (explain):

Is this dog crate trained? 🞎 Yes 🞎 No

What is the maximum amount of time the dog spends in its crate?

What size crate? 🞎 Small 🞎 Medium 🞎 Large 🞎 Extra large

What type of crate (wire, plastic, etc.)?

Does this dog potty in the crate? 🞎 Yes 🞎 No 🞎 Only when left over hours

Are these accidents: 🞎 Urination only 🞎 Bowel movements only 🞎 Both

# Grooming *Please check all that apply*

Has this dog been groomed or bathed in the home? 🞎 Yes 🞎 No

How did this dog behave for home grooming or bathing?

🞎 Calm, enjoys the attention 🞎 Anxious, **does** allow the bathing / grooming

🞎 Anxious, **doesn’t** allow bathing / grooming 🞎 Must be muzzled to avoid biting

🞎 Growls 🞎 Must be sedated

🞎 Nips 🞎 Other:

Has this dog been professionally groomed? 🞎 Yes 🞎 No

How often has this dog been to the groomer?

How does this dog behave at the groomer?

🞎 Calm, enjoys the attention 🞎 Anxious, **does** allow the bathing / grooming

🞎 Anxious, **doesn’t** allow bathing / grooming 🞎 Must be muzzled to avoid biting

🞎 Growls 🞎 Must be sedated

🞎 Nips 🞎 Other:

How does this dog behave when having its nails trimmed?

🞎 Calm, enjoys the attention 🞎 Anxious, **does** allow the bathing / grooming

🞎 Anxious, **doesn’t** allow bathing / grooming 🞎 Must be muzzled to avoid biting

🞎 Growls 🞎 Must be sedated

🞎 Nips 🞎 Other:

**Exercise and Play Information** *Please check all that apply*

Does this dog receive exercise? 🞎 Yes 🞎 No

How often is this dog exercised?

Where is this dog exercised?

 🞎 Beach 🞎 Park 🞎 Dog park 🞎 Walk

* Yard: 🞎 Supervised 🞎 Unsupervised

🞎 Other: 🞎 Supervised 🞎 Unsupervised

Does this dog receive playtime? 🞎 Yes 🞎 No

How often does this dog receive playtime?

Please mark on the scale where this dog’s play style falls:

|  |
| --- |
| Gentle***1 2 3 4 5*** Rough  |

What kind of toys does this dog like?

Describe activities you did with this dog:

|  |  |
| --- | --- |
| 🞎 Petting  | 🞎 Brushing  |
| 🞎 Bathing | 🞎 Playing fetch |
| 🞎 Playing tug-o-war  | 🞎 Running errands |
| 🞎 Playing chase | 🞎 Training classes |
| 🞎 Rough-housing  | 🞎 Going to restaurants / cafes |
| 🞎 Training games  | 🞎 Quiet companionship  |
| 🞎 Road trips  | 🞎 Relaxing on the bed / couch together |
| 🞎 Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Feeding Information** *Please check all that apply*

What type of food does this dog eat?

🞎 Canned dog food Brand:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞎 Dry dog food Brand:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞎 Dry mixed with canned Brand(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞎 Special diet Brand / type:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does this dog have any favorite treats? 🞎 Yes 🞎 No

Please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Training Information *Please check all that apply*

Which behaviors is this dog familiar with?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 🞎 Sit | 🞎 Down | 🞎 Stay | 🞎 Come | 🞎 Heel |
| 🞎 Speak | 🞎 Shake | 🞎 Roll Over | 🞎 Fetch | 🞎 Sit Pretty |

🞎 Loose leash walking 🞎 Other:

What training equipment has the dog been exposed to?

* Clicker 🞎 Treats 🞎 Head halter (type and size):
* Harness 🞎 Choke chain 🞎 Prong / pinch collar 🞎 Electronic collar

Was this equipment successful?

Has this dog had obedience training? 🞎 Yes 🞎 No

Where and with whom was this training?

How long ago was the training?

If you have disciplined this dog, what method(s) did you use?

|  |  |
| --- | --- |
| 🞎 Verbal correction | 🞎 Physical correction |
| 🞎 Squirt bottle | 🞎 Penny can / other item shaken or thrown at the dog |
| 🞎 Ignore the behavior | 🞎 Timeout |

🞎 Other:

How does this dog respond to the above discipline?

**Behavioral Information** *Please check all that apply*

This dog has been in the company of:

🞎 Adults & Small Children 🞎 Adults & Older Children 🞎 Adults Only

🞎 Not interested in people 🞎 Other dogs 🞎 Cats 🞎 Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your pet have a preference for:

|  |  |  |
| --- | --- | --- |
| 🞎 Men | 🞎 Women | 🞎 Children |

🞎 Other:

What makes this dog worried or causes it to behave in a different manner than usual?

|  |  |  |
| --- | --- | --- |
| 🞎 Children | 🞎 Strangers | 🞎 Going to the vet |
| 🞎 Going in the car | 🞎 Other dogs | 🞎 Other animals |
| 🞎 Nail trimming | 🞎 Baths | 🞎 Crowds |

🞎 Fireworks 🞎 Other:

Does this dog have separation anxiety? 🞎 Yes 🞎 No

Was this separation anxiety diagnosed by:

|  |  |  |
| --- | --- | --- |
| 🞎 You | 🞎 Veterinarian | 🞎 Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

What have you done to deal with the separation anxiety?

What do you enjoy the ***most*** about this dog?

What do you enjoy the ***least***about this dog?

Please describe the ideal home you would like for this dog:

Please list any additional information that you feel would be helpful for us or a new owner to know about this dog (this will help us make the best possible match with a new home):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This dog is overprotective of: 🞎 Family 🞎 Its food/toys 🞎 Own property

 If you **checked a box**, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does this dog have a tendency to snap or bite? 🞎 Yes 🞎 No

If **yes** explain:

Does your dog display predatory behavior? 🞎 Yes 🞎 No

If **yes** explain:

For the safety of our employees and volunteers, is there anything else we should know about this dog?

## Veterinary Information *Please check all that apply*

Name of this dog’s veterinarian or clinic:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we contact your veterinarian? 🞎 Yes 🞎 No

If neutered or spayed, at what age? Where / by whom?

Has this dog had any major health problems? 🞎 Yes 🞎 No

Please explain:

What medications has this dog received or is currently receiving?

|  |  |  |  |
| --- | --- | --- | --- |
| Medication | Date | Illness | Vet / Clinic Name |

Please list any surgeries or illnesses requiring hospitalization:

|  |  |  |
| --- | --- | --- |
| Illness / Procedure | Date | Vet / Clinic Name |

Has this dog had any medical problems in the following areas?

|  |  |  |  |
| --- | --- | --- | --- |
| 🞎 Birth defects  | 🞎 Hair loss  | 🞎 Diarrhea  | 🞎 Vomiting |
| 🞎 Worms in stool  | 🞎 Sneezing  | 🞎 Runny eyes  | 🞎 Poor appetite |
| 🞎 Weight loss  | 🞎 Coughing  | 🞎 Allergies | 🞎 Urinary |
| 🞎 Bones | 🞎 Joints | 🞎 Ear infection | 🞎 GI / Stomach |

🞎 Other:

Please explain:

Were these conditions diagnosed / treated by a veterinarian? 🞎 Yes 🞎 No

How does this dog behave at the veterinary office?

|  |  |
| --- | --- |
| 🞎 Calm, relaxed  | 🞎 Must be restrained |
| 🞎 Growls, procedures **can** be completed | 🞎 Growls, procedures **can’t** be completed  |
| 🞎 Will nip  | 🞎 Will bite |
| 🞎 Must be muzzled  | 🞎 Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**IF YOU HAVE ANY OTHER ANIMALS IN YOUR HOME, PLEASE COMPLETE THE FOLLOWING *FOR* *EACH PET***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Species/Breed | Age | Male/Female | Altered? | Did they get along with surrendered pet? | Explain |
| Pet 1 |  |  |  |  |  |  |
| Pet 2 |  |  |  |  |  |  |
| Pet 3 |  |  |  |  |  |  |
| Pet 4 |  |  |  |  |  |  |