

Canine Surrender Profile

Dog's Name _____ Breed/breed mix _____
Age _____ Sex: Male Female (circle) Is your dog spayed or neutered? _____ When? _____
How long has this dog lived with you? _____
Where did you acquire your dog? _____ How old was he/she when you acquired him/her? _____
Who is your Veterinarian? _____ Does your dog have any medical problems? _____

Why are you surrendering your dog to the shelter? (circle all that apply)

Behavioral problems Time commitment Family Issues Health Issues (yours or dogs) Other

Please explain in your own words why you need to relinquish your dog _____

Where does your dog spend most of the time? Inside _____ Outside _____ Inside/Outside _____

Do you have a fenced-in yard? _____ If not, do you have a tie-out or runner for your dog? _____ Electric fence? _____

How long is your dog left in your yard each day? _____

Do you take your dog for leash walks? _____ How often? _____ How does he/she walk on the leash? _____

How long each day is your dog left alone inside your home? _____ Is he/she free or confined _____

If your dog is confined – where/how? _____

Is your dog crate trained? _____ Do you still use the crate? _____ Is the crate plastic or metal mesh _____

Does your dog have accidents in the house? _____ How often? Daily _____ weekly _____ once in a while _____

Does your dog destroy things? _____ If so, what? _____

If your dog has accidents or is destructive – is it always when he/she is alone? _____

Does your dog have any other “naughty” behaviors? _____

Has your dog had any obedience training? No ___ Yes ___ How many classes has your dog attended? _____

What commands does he/she know? Sit ___ Down ___ Stay ___ Come ___ Shake ___ Roll over ___ Other _____

How do you correct your dog? _____

What other animals has your dog lived with? Dogs ___ Cats ___ Other (list) _____

How does he/she behave with the other dog/s in the home? _____ with the cat/s? _____

What does your dog do when he/she sees another dog while on a walk? _____

Is your dog's behavior different around dogs if on a leash compared to off leash? _____

How often does your dog interact with other dogs (on or off leash)? _____

Has your dog ever fought with another dog? _____ Has your dog ever injured another dog? _____

What does your dog do when he/she sees a neighborhood cat while on a walk? _____

What does your dog do when he/she sees a small animal like a squirrel? _____

Has your dog ever lived with children? No ___ Yes ___ If so, what ages? _____

Is your dog good with those children (friendly, tolerant)? No ___ Yes ___ If no, please explain _____

If your dog doesn't live with children, how often does he/she interact with children? _____

What does your dog do if:

- a strange child runs up to him/her in an excited fashion? _____
- a child is crying or screaming? _____
- a child tries to hug him/her? _____
- a child pets/touches him/her? _____
- he/she sees a child running away or riding a bike or skateboard? _____

What does your dog do when:

- a stranger/visitor knocks on the door? _____
- the mailman or UPS man comes to your home? _____
- a stranger or visitor comes into the house? _____
- a stranger approaches you on a walk? _____
- you or someone else goes near his food bowl when he/she is eating? _____
- you or someone else tries to take away toys or rawhide? _____
- you or someone else tells him/her to get off the sofa or bed? _____
- you or someone else gives him/her a hug? _____
- you play rough with him/her? _____
- you reprimand him/her? _____

Has your dog ever growled at you or anyone else? No ___ Yes ___ If yes, please explain the situation _____

Has your dog ever snarled at you or anyone else? No ___ Yes ___ If yes, please explain the situation _____

Has your dog ever nipped at you or anyone else? No ___ Yes ___ If yes, please explain the situation _____

Has your dog ever snapped at you or anyone else? No ___ Yes ___ If yes, please explain the situation _____

Has your dog ever bitten (broken skin) you or anyone else? No ___ Yes ___ If yes, please explain the situation _____

Is your dog afraid of anything? (If yes, describe) _____

Is your dog sensitive about being handled in any way? (If yes, describe) _____

Is your dog accustomed to: bathing _____ brushing/combing _____ nail clipping _____ ear cleaning _____ none _____

How does your dog behave in the car? _____

How does he behave at the Veterinarian? _____

Is your dog microchipped _____ If so, what company? _____

What brand of food does your dog eat? _____ How much is your dog fed? _____

What is your dog's favorite game or toy? _____

What is your dog's best quality? _____

Additional comments: _____

Thank you for answering these questions honestly. Everything you have told us about your dog is important.