

INCOMING DOG PROFILE

Today's Date:	
Dog's	s Information
Dog's Name:	
Dog's Number (Front Office Use ONLY):	
Dog's Age:	
Sex of Dog:	
☐ Male☐ Female	
Is the Dog Spayed/Neutered?	
☐ Yes ☐ No	
☐ I don't know	
Breed of Dog:	
Color of Dog:	
Why are you surrendering your Dog today?: _	
Does the Dog have any Health Issues or on a Sp	pecial Diet?
□ Vos	

☐ No

If yes, please describe?:	
Where did you get your Dog?:	
How long have you owned your dog?:	
Do you live in a	
 ☐ House ☐ Townhouse ☐ Apartment ☐ Duplex ☐ Other, Please describe: 	
List other animals in Home (Please indicate Species, Breed, Age, and Sex):	
How does the Dog react to other Dogs?:	
☐ Good ☐ Bad ☐ I don't know	
Would you recommend the Dog be placed in a home with Cats?:	
☐ Yes ☐ No ☐ I don't know	
How many People live in your Home?:	
How many Children live in your Home?:	
How does the Dog react to known Children in the Home?:	
☐ Good ☐ Bad ☐ I don't know	
How does the Dog react to unknown Children in the Home?:	
☐ Good ☐ Bad ☐ I don't know	

How does the Dog react to Visitors?:
☐ Good ☐ Bad ☐ I don't know
How does the Dog react to Men?:
☐ Good ☐ Bad ☐ I don't know
How does the Dog react to Women?:
☐ Good ☐ Bad ☐ I don't know
Dog's Activity Level in the Home:
□ Active□ Average□ Quiet
Dog's Activity Level Outside:
□ Active□ Average□ Quiet
Where does the Dog stay during the Day?:
Where does the Dog stay when you are out of the House?:
Where does the Dog stay at Night?:
How does the Dog React when
Someone enters the Home?:
☐ Good ☐ Bad ☐ I don't know

The Dog is in Public?:
☐ Good ☐ Bad ☐ I don't know
The Dog is Touched?:
☐ Good ☐ Bad ☐ I don't know
Food is taken from the Dog?:
☐ Good ☐ Bad ☐ I don't know
Toys or Items taken from the Dog?:
☐ Good ☐ Bad ☐ I don't know
Is the Dog Afraid of Anything?:
 □ Vacuums □ Brooms □ Loud Noises □ Water □ Plastic Bags □ Fireworks □ Storms □ Cars
☐ Other? Please Describe: