



Date _____

Staff Initials _____

Canine Surrender Profile

Dog's Name _____ Breed/breed mix _____

Age _____ Weight _____ Sex: Male Female (circle) Is your dog spayed or neutered? _____

When? _____ Who is your Veterinarian _____

Is your dog up to date on his/her vaccinations? _____ Date of Rabies Vaccination _____ Tag # _____

Where did you acquire your dog? _____ How old was he/she when

you acquired him/her? _____ How long has this dog lived with you? _____

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

Circle all that apply to describe your dog's personality:

Friendly Shy Independent Fearful Playful Affectionate Aloof Aggressive Overly reactive

Describe your dog's personality in your own words _____

What is your dog afraid of? _____

Describe your dog's reaction _____

Where is your dog sensitive about being handled? (example: ears, feet, etc.) _____

Describe your dog's reaction _____

When does your dog become irritated? _____

Describe your dog's reaction _____



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? _____ Electric fence? _____

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

Do you take your dog for leash walks? _____ How often? _____

What kind of collar do you use? Buckle collar Body Harness Head halter Pinch collar E collar

How does he/she walk on the leash? Fine Pulls Other _____

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? Yes ___ No ___ Do you still use the crate? _____ How many hours is typical? _____

Does your dog have accidents in the house? Yes ___ No ___ If yes, how often? daily ___ weekly ___ once in a while ___
urinate only ___ defecate only ___ both ___

Does your dog destroy things in the house when left alone? yes ___ no ___ What items? _____

How often? Daily ___ 1-2 times a week ___ 1-2 times a month ___ Occasionally _____

If your dog has accidents or destroys things, is it only when left alone? Yes ___ No ___

Has your dog escaped from the house or yard before? Yes ___ No ___ If yes, how? Jumping ___ Digging ___
Climbing ___ Opened door/gate ___ How many times? _____

What does your dog do when: Please answer with reactions such as: jumps up, barks, growls, snaps, greets well, is friendly, pulls away, runs away, hides, etc.

the mailman or UPS man comes to your home? _____

a stranger/visitor knocks on the door? _____



a stranger/visitor comes into the house? _____

a visitor tries to pet him/her inside your house? _____

a stranger approaches you while on a walk? _____

a stranger attempts to pet him/her while on leash with you? _____

a stranger walks past the car when he/she is inside? _____

unfamiliar people walk by the home when he/she is in the yard? _____

you or someone else goes near the food bowl when he/she is eating? _____

you or someone else tries to take away toys, rawhide, or anything else of value? _____

you or someone else tells him/her to get off the furniture? _____

you or someone else touches him/her while sleeping? _____

you or someone else gives him/her a hug? _____

you or someone else bathes or grooms him/her? _____

you or someone else reprimands him/her? _____

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

How would you describe your dog's behavior towards the children? Mostly friendly ___ Tolerant ___ Nervous ___

Scared ___ Jumps on ___ Too much for them in play (knocks over, etc.) ___

If your dog has had issues with the children that included behavior such as growling, showing teeth, or snapping at them please describe how many times and give as much detail as you can:



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

What does your dog do if:

a child is crying/screaming? _____

a child runs towards him/her? _____

a child tries to hug him/her? _____

a child touches /pets him/her? _____

he/she sees a child on a bike? _____

he/she sees a child running? _____

you pick up a child? _____

When was the last time your dog snarled (showed teeth) at you or someone else (please explain the situation) _____

When was the last time your dog growled at you or someone else (please explain the situation) _____

When was the last time your dog snapped at you or someone else (please explain the situation) _____

When was the last time your dog nipped you or someone else (please explain the situation) _____

When was the last time your dog bit and broke skin on you or someone else (please explain the situation) _____



What other animals has your dog lived with? dogs ____ cats ____ other _____

Did he/she do well with the house cat/s? ____ Any issues? _____

Did he/she get along with the other dog/s? ____ Any issues? _____

How does your dog react when he/she sees an outdoor cat? _____

How does your dog react when he/she sees a small animal like a squirrel? _____

How does your dog react when he/she sees another dog outside? _____

Is his/her behavior different when on leash compared to when off leash when seeing another dog? _____

Has your dog ever fought with another dog? yes ____ no ____ Describe incident _____

Has your dog ever injured another dog? yes ____ no ____ Describe incident and injury _____

Has your dog ever killed a prey animal? (example: rabbit, bird, squirrel, chipmunk, mouse) _____

How do you exercise your dog? _____ How often? _____

Have you ever taken your dog to a training class? Yes ____ No ____ OR Have you trained him/her yourself? Yes ____ No ____

What kind of training have you tried? choke chain ____ electric shock ____ treats ____ praise ____ clicker ____

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

Which behaviors does your dog need improvement on? Jumping ____ Digging ____ Barking ____ Whining ____

Begging ____ Chewing ____ Trash picking ____ Counter surfing ____

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



What is your dog's best quality? _____

What is your dog's worst quality? _____

Does your dog have any known medical conditions? _____

Does your dog have any allergies? _____

Is your dog on any medication? If so, which drug and what for? _____

Does your dog have any current injuries? _____

By signing below, you acknowledge that the provided information is true to the best of your knowledge.

Your Signature _____

Your Printed Name _____

Address _____

City _____ State _____ Zip code _____

Phone _____

Email _____

Thank you for answering these questions honestly. Everything you have told us about your dog is important to aid us in finding him/her an appropriate home.



Help Desk Surrender Checklist

- The customer is in Petpoint, P#: _____
- The pet is in Petpoint, A#: _____
- I counseled on Pet Retention Resources: _____

- I counseled Todd's Medical Fund
- I offered alternate Rescue and Rehoming Resources
- I disclosed the \$50 surrender fee
- Additional Notes: _____

Admissions Surrender Checklist

- I called the customer and scheduled or attempted to schedule an appointment on: _____
- I called the customer's vet and requested full medical records. Called on: _____
- I offered alternate Rescue and Rehoming Resources if applicable
- I disclosed the \$50 surrender fee
- I uploaded this form to the pet's profile
- Additional Notes: _____
