Dog Background Information (to help match your dog with a new owner)			Incoming No.	No Staff Initials		
Dog's Name		Dog's Age	Breed	Mixed Date of last shots		
		○ Spayed? ○ Neutered	d? Vet name			
Where did you get your dog?	Where does your dog spend most of the	Where does your dog usually sleep?	What is your dog's activity level?	What age people lived with you dog?	How is your dog around children?	
<ul> <li>This shelter</li> <li>Another shelter</li> <li>Breeder</li> <li>Pet Shop</li> <li>Found/Stray</li> <li>Newspaper</li> <li>Born at Home</li> <li>Other</li> </ul>	time?  O Inside home O Patio/deck O Fenced Yard O Unfenced Yard O Basement O Crate O Other	<ul> <li>Owner's room</li> <li>Owner's bed</li> <li>Dog house</li> <li>Garage</li> <li>Patio</li> <li>Basement</li> <li>Furniture</li> <li>Crate</li> <li>Other</li> </ul>	<ul> <li>High</li> <li>Normal</li> <li>Low</li> <li>How much exercise did your dog get?</li> <li>Walkx / week</li> <li>Jog/runx / week</li> <li>Playtimex / week</li> <li>None</li> </ul>	<ul> <li>Adult men</li> <li>Adult women</li> <li>Seniors</li> <li>Children over 10</li> <li>Children under 10</li> </ul> Has your dog ever bitten anyone? <ul> <li>Yes</li> <li>No</li> </ul>	<ul> <li>Friendly</li> <li>Playful</li> <li>Tolerant</li> <li>Afraid</li> <li>Snappy/bites</li> <li>Too rough</li> <li>Never been with children</li> </ul>	
			O Other	Is your dog housebroken? ○ Yes ○ No ○ Somewhat		
What training has your dog had?  Obedience classes Home training Professional training None How many hours a day is your dog left alone?  Does your dog escape a	What does your dog know how to do?  Sit Stay Down Come when called Walk on leash Give paw Other tricks	What problems does your order of the control of the	Our dog have?  O Shyness with strangers O Guarding territory O Guarding objects, food, or toys O Growling, snapping obiting over objects, food or toys O Other	<ul><li>Large trucks</li><li>Water/rain</li><li>Appliances</li><li>Sweepers</li><li>Hands or feet</li></ul>	Who does your dog get along with?  Male dogs Female dogs Cats (indoor) Cats (outdoor) Birds Poultry Livestock Never around other animals	
What health problems does your dog have?	What medication does your dog take?	What special diet does your dog need?	What food did you feed your dog?	Why are you giving up your	dog? (be honest and specific)	
			<ul><li>O Dry</li><li>O Canned</li><li>O Mixed</li></ul>			
			What brand?			
O None	O None	O None		If you are giving up your dog because of a behavioral problem,		
Has your dog had an inj	uryr Ono Oyes			would you keep it if you could s	solve the problem? O Yes O No	