



## OWNER SURRENDER SUPPLEMENTAL FORM

Please fill out the following form honestly to assist us in making a suitable match for your surrendered companion.

Pet's Name: \_\_\_\_\_ Breed: \_\_\_\_\_

Age: \_\_\_\_\_ How long has this animal lived with you? \_\_\_\_\_

From where did you obtain the pet?

Please explain why you are relinquishing your pet.

What is the name and number of your current and/or previous veterinary clinic?

Does your pet have any medical concerns such as allergies or seizures?  Yes  No

- If yes, please explain:

- If so are they controlled by:  Special diet  Drug dosage  Uncontrolled

Please explain:

What does a 24-hour period look like for your pet?

Has your pet ever escaped from the yard or house?  Yes  No

If yes, please explain how:

How many hours is your pet comfortable being left alone?

Has your pet ever been introduced to a crate?  Yes  No

- If yes, please describe his/her behavior in the crate:

Is your pet housetrained/litter box trained?  Yes  No

- If not, under what circumstances might he/she have an accident?

What is your pet's favorite game/activity/toy?

Who is your pet's favorite company?

How does your pet generally show affection?

How does your pet generally greet strangers in the home?

How does your pet greet strangers/other animals outside of the home or in general?

How does your pet behave at the vet?

- If he/she has a negative experience, please explain:

What commands does your pet know?

What experience does your pet have with children?

Yes

No

- If yes, what ages and what circumstances:

Would you recommend that your pet be placed in a home with children?

Yes

No

- If no, please explain:

Does your pet display any behaviors that the new adopters will need to be aware of? (ex. Chewing, excessive barking, separation anxiety, destructive)?

Yes

No

- If yes, please explain:

When does the pet exhibit these behaviors?

Do these behaviors continue to happen?  Yes  No

- If yes, please explain consistency:

Has your pet ever growled at you or anyone else?  Yes  No

- If yes, please explain:

Has your pet ever (check all that apply):  Bared their teeth  Lunged  Snapped  Bit  
 Shown any other form of aggression at you or anyone else  
 None of the above.

- If yes, please explain:
  
- If bit, please describe the injuries:

Does your pet have any fears?  Yes  No

- If yes, what are they?

What does your pet do when he/she is frightened?

Is your pet sensitive about being handled in any way?  Yes  No

- If yes, please explain:

What reaction from your pet indicates that he/she is sensitive?

Has your pet lived with what other animals?  Yes  No

- What kinds?

Was the situation successful?  Yes  No

- If not, please explain why:

Has your pet ever fought with another animal?

Yes

No

- If yes, please describe the situation:

Were food, toys, or rawhides involved?

Yes

No

Has your pet ever injured another animal?

Yes

No

- If yes, where on the other animal's body was the injury (check all that apply):

To the back of head or neck

To the feet, legs

Abdomen

Other:

How severe was the injury? (Check all that apply):

Bruise or scrape

Single bite (puncturing the skin)

Multiple bites (puncturing the skin)

Severe multiple bites/mauling

Other:

Please use the space below for any additional information you would like to share about your pet: