



DOG PROFILE

DOG AND HOUSEHOLD INFORMATION:

Dog's Name: _____ Sex: Male Female Dog's Age? _____

Is this dog spayed or neutered? Yes No Unsure

Breed: _____ How long have you owned this dog? _____

Where did you get this dog? (If another rescue/shelter please list the name and location)

Please list reason for surrender:

Please list how many people and animals this dog **has lived with below**. Place a check mark next to any descriptions of behavior with that person or animal below that apply.

Children ages: 0- 5 yrs. # of children ____ Age(s) _____	Children ages: 6-12 yrs. # of children ____ Age(s) _____	Children ages: 13-17 yrs. # of children ____ Age(s) _____	Adults: # female: ____ # male: ____	Dogs # _____ Size of dog(s) _____	Cats # _____
Friendly	Friendly	Friendly	Friendly	Friendly	Friendly
Fearful	Fearful	Fearful	Fearful	Fearful	Fearful
Submissive	Submissive	Submissive	Submissive	Submissive	Submissive
Tolerates	Tolerates	Tolerates	Tolerates	Tolerates	Tolerates
Bites/Snaps	Bites/Snaps	Bites/Snaps	Bites/Snaps	Bites/Snaps	Chases
Barks/growls	Barks/growls	Barks/growls	Barks/growls	Barks/growls	Barks/growls

Please list any other animal this dog lived with (hamsters, guinea pigs, birds...):

DIETARY HABITS:

What type of food does this dog eat? (dry, wet, both, people food) _____

Brand of food? _____ Is this dog a picky eater? Yes No If yes, please explain:

Any food sensitivities or allergies? Yes No If yes, please explain: _____

MEDICAL HISTORY:

Has this dog ever been to a veterinarian? Yes No If yes, when was the last visit?

Is this dog currently up to date with vaccines? Yes No

Has this dog ever been diagnosed with and/or treated for any medical conditions? Yes No
If yes, please explain: _____

Does this dog have to be muzzled at the veterinarian? Yes No

PERSONALITY/BEHAVIOR:

How would you describe your dog's personality most of the time? (Please check all that apply)

Energetic Couch Potato Noisy/Loud Aggressive Playful Lap Dog Quiet
 Affectionate Distant Fearful Friendly to visitors Shy to visitors Independent

Additional comments: _____

This dog is afraid/does not like: Thunder/Fireworks Loud noises Stairs Water

Other dogs Cats Men Women Kids Raincoats/Umbrellas/Hats Cars

Strollers/Bicycles Other (please describe): _____

Additional comments: _____

Who has this dog met outside of the immediate family?

How does this dog react to **unknown men**? Never Encountered Friendly Afraid/Avoids

Shows teeth/growls Snaps Bites Barks Reactive on the leash Jumps on them

Other (please describe): _____

Additional comments: _____

How does this dog react to **unknown women**? Never Encountered Friendly

Afraid/Avoids Shows teeth/growls Snaps Bites Barks Reactive on the leash

Jumps on them Other (please describe): _____

Additional comments: _____

How does this dog react to **unknown children**? Never Encountered Friendly

Afraid/Avoids Shows teeth/growls Snaps Bites Barks Reactive on the leash

Jumps on them Other (please describe): _____

Additional comments: _____

Has this dog met other dogs? Yes No If yes, how does he/she react to the other dogs?

What is the typical behavior with **unknown dogs**? Never Encountered Friendly
 Afraid/Avoids Shows teeth/growls Snaps Bites Barks Reactive on the leash
 Other (please describe): _____
Additional comments: _____

How would you describe your dog's favorite style of play? (Please check all that apply)
 Gentle Will learn tricks for treats Fetch Rough Playing with toys Tug
 Playing with other dogs Doesn't show interest in playing Other (please describe): _____
Additional comments: _____

Energy Level: High Moderate Low Additional comments: _____

Is this dog trained to walk on a leash/harness? Yes No
Additional comments: _____

Is this dog reactive/aggressive while on leash/walks? (pulls/lunges at other dogs/bicycles...)
 Yes No Sometimes Additional comments: _____

Does this dog **chase** squirrels/cats/other dogs/children on bikes/etc.?

Do you take your dog outside to go to the bathroom? Yes No Paper trained

If yes, how many times a day does the dog go out and where? _____

How does this dog let you know it needs to go outside? _____

Does your dog have accidents in the house? Yes No

If yes, how often? Daily A few times a week A few times a month A few times a year

If yes, does this dog: Urinate Defecate Both

Is the dog crate trained? Yes No

If yes, how long did the dog spend in the crate each day? _____

How long is this dog left alone each day, without people? Never 1-3 hours 4-8 hours
 9-12 hours over 12 hours

When alone, is this dog: Outdoors Free in the house Confined to a room Crated

Other (please describe): _____

When left alone does this dog: Destroy household items Urinate Defecate Bark
 Cry/howls None Sleeps/rests/plays with toys Additional comments:

If this dog destroys household items check all that apply: Woodwork/walls Windows/doors
 Furniture Clothing/shoes Other (please describe):

When you are home does this dog have free run of the house? Yes No If no, where is the dog kept?

When you are home, does this dog? Destroy household items Urinate Defecate Bark
 Cry None Sleeps/rests/plays with toys Additional comments:

Are there areas on the dog's body this dog does **NOT** like to be touched? Ears Mouth
 Tail Collar Rear end Paws/nails Can touch dog anywhere Other (please describe): _____

If touched in the above place(s), how does this dog respond? Moves away Growls
 Shows teeth Snaps Bites Doesn't react negatively when touched anywhere
Additional comments: _____

Has this dog ever been to the groomer? Yes No If yes, is a muzzled used? _____
Additional comments: _____

What commands does this dog understand? Sit Come Fetch Stay Leave it
 Okay Down Drop Heel off No Quiet Treat/cookie None Other

Has this dog received any obedience training/puppy classes? Yes No
Additional comments: _____

Aggressive Behavior: (behavior that has EVER happened)

Has this dog ever inflicted a bite to a person that required medical attention? Yes No

Has this dog ever injured another dog? Yes No

Has this dog ever been injured by another dog? Yes No

Has this dog ever injured any other type of animal? (cats, rabbits, birds, livestock) Yes No

Please explain the circumstance if you answered **YES**, to any of the above questions:

How does this dog react when you or another family member... (check appropriate boxes)	Never tried	Allows	Lunges	Shows teeth	Growls	Snaps	Bites	Other (please describe)
...pet him/her or touch the bowl or food while eating								
...pet him/her or touch a bone, rawhide, pig's ear or other delicious edible while chewing								
.... approach him/her while next to another family member								
..pet him/her or touch a stolen object (tissue, shoe, sock, etc.)								
when other animal(s) in the house come near food/toys/special treats...								

Additional comments:

Please tell us anything else you think we should know about this dog's behavior and personality.
(Likes/dislikes/bad habits...)