

Animal Code _____

Date Received _____

DOG QUESTIONNAIRE

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Please fill out this form as completely as possible. No one knows and loves your dog the way you do. To help us find the best new home for your dog, please provide as much detail as possible about the likes, dislikes, history, and vet care of your canine friend. Behavioral and medical issues do not necessarily create problems, but failing to disclose them certainly can!

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Dog's Name: _____ Dog's Birthdate: _____

Dog's Sex: ☐ Male ☐ Female ☐ Is your dog spayed/neutered? ☐ Yes ☐ No ☐ Unsure

What kind of I.D. does your dog have? _____

Tattoo: If so, where is it located? _____

Microchip: If so, who is it registered to? _____

How long has your dog lived with you? _____

Where did you get your dog? ☐ HSSW ☐ Breeder ☐ Stray ☐ Pet Store ☐ Friend/Family ☐ Newspaper/
Craigslist ☐ Born in my home ☐ Another Shelter _____ Other _____

If you got your dog from a breeder, what is the name and location of the breeder? _____

Your Dog's Lifestyle

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How many hours is your dog left alone? ☐ 0-3 ☐ 4-6 ☐ 7-10 ☐ Over 10

Was this successful? ☐ Yes ☐ No ☐ If no, why not? _____

How many hours a day does your dog interact with people? ☐ 1-2 ☐ 2-4 ☐ 4-6 ☐ 6-10 ☐ Over 10

Where does your dog stay when you are not home? ☐ Inside (free rein) ☐ Indoor ☐ Crate

☐ Outside (free rein) ☐ Outside kennel ☐ Other _____

Where does your dog spend his/her time when you are at home? ☐ Inside (free rein) ☐ Crate

☐ Outside (free rein) ☐ Outside kennel ☐ Other _____

Explain how your dog was confined to your property when outside: ☐ Fenced yard

☐ Electronic Pet Containment (what type) ☐ Kennel ☐ Tied out (chain or runner) ☐ Dog House

☐ Never outside ☐ Offleash ☐ Other _____

Do you have a fully-fenced yard? ☐ Yes ☐ No

If yes, please check all that apply: ☐ Chain Link ☐ Wood ☐ Invisible Fence ☐ Brick/Concrete

How high is the fence? _____ feet

Where does your dog sleep at night? (check all that apply): ☐ Loose inside the house ☐ In Garage ☐ Outside

☐ In child's room ☐ On my bed ☐ On dog bed ☐ Confined to one room ☐ In adult's room ☐ Crate

☐ On couch or chair ☐ Other _____

Would you trust your dog loose in the house unsupervised? ☐ Yes ☐ No

If no, why not? _____

Is your dog housetrained? ☐ Yes ☐ No

Do your dog's housetraining accidents most happen when: (check all that apply)

☐ When dog is not closely supervised ☐ When dog is overexcited ☐ When dog is not kept on a schedule

☐ When dog is sleeping ☐ When dog signals to be let out and is ignored ☐ When dog is left alone for

too long ☐ Other: _____

How have you dealt with this problem? (check all that apply)

☐ Consult vet or trainer ☐ Paper training ☐ Confined dog to an area ☐ Kept dog outside

☐ Other: _____

Is your dog crate trained? ☐ Yes ☐ No

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

Can your dog be left outside unsupervised? ☐ Yes ☐ No

If no, why not? _____

Is your dog permitted to sit/sleep on furniture? ☐ Yes ☐ No

Does your dog jump up on people when greeting them? ☐ Yes ☐ No

Is your dog constantly underfoot when food is present? ☐ Yes ☐ No

Does your dog beg at the table or in the kitchen? ☐ Yes ☐ No

If yes, is the behavior rewarded with food? ☐ Yes ☐ No

Children/Family

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Has your dog lived with children? ☐ Yes ☐ No

What ages of children has your dog lived with? (check all that apply) ☐ Under 6 ☐ 6-11 ☐ 12-16 ☐ 16 and over

Did your home have children as visitors on a regular basis? ☐ Yes ☐ No

If yes, what were the ages of the children? _____

Will your dog accept examination by children younger than 6 years old? (having ears lifted and tugged, having tail held or grabbed, fur scrunched or grabbed by children's hands?) ☐ Yes ☐ No

Has a child ever tripped over, stepped on, or fallen on your dog? ☐ Yes ☐ No

If yes, what was your dog's reaction? _____

How does your dog react to a child approaching when he/she is sleeping? _____

Is your dog possessive about where he/she sleeps? ☐ Yes ☐ No

If yes, what does he/she do? _____

Would you recommend your dog live with children? ☐ Yes ☐ No

Why or why not? _____

Would you recommend your dog live where children visit on a regular basis? ☐ Yes ☐ No

Describe your dog's behavior around children (check all that apply)

☐ Never been around children ☐ Friendly/Playful ☐ Gentle ☐ Nervous/Frightened ☐ Snappy at times

☐ Avoids children ☐ Watches over children ☐ Indifferent ☐ Too active ☐ Aggressive ☐ Unpredictable

☐ Excited ☐ Adores children ☐ Has bitten a child/tried to bite a child

☐ Other: _____

Will your dog allow children to touch their food without getting upset? ☐ Yes ☐ No

Does your dog try to take food from children when it is not offered? ☐ Yes ☐ No

Will your dog take treats offered by the child gently? ☐ Yes ☐ No

Does your dog hover nearby when the child has food? ☐ Yes ☐ No

Have your children fed/watered your dog on a daily basis? ☐ Yes ☐ No

Does your dog accept being brushed/hugged/petted by children? ☐ Yes ☐ No

Behavior & Training

What training/activities did you participate in with your dog? (check all that apply)

☐ Obedience ☐ Agility ☐ Flyball ☐ Herding ☐ Therapy Dog ☐ Fieldwork ☐ Schutzhund ☐ Weight Pull

☐ Other: _____

Please tell us about the tricks and habits you have taught your dog (check all that apply)

- ☐ Basic obedience commands ☐ Come when called ☐ Play fetch ☐ Walk on a loose leash
☐ Ride nicely in a car ☐ Wait for food ☐ Greet visitors politely ☐ Take treats gently
☐ Get off and on the furniture when asked ☐ Other: _____

What words does your dog understand? ☐ Sit ☐ Stay ☐ Down/Lay ☐ Come ☐ Leave it ☐ Drop it
☐ Wait ☐ Off ☐ Fetch ☐ Shake ☐ No commands ☐ Other: _____

Does your dog run after cars, bikes or pedestrians? ☐ Yes ☐ No

If yes, what does your dog do when he/she gets to them? _____

Describe your dog's behavior in the car (check all that apply)

- ☐ Loves it ☐ Calm ☐ Afraid but ok ☐ Gets car sick ☐ Nervous ☐ Hates it ☐ Tolerates it ☐ Protective
of car ☐ Dog never rides in car ☐ Other: _____

Is your dog destructive if left alone inside the home? ☐ Yes ☐ No

- If yes, please check all that apply: ☐ Chews woodwork/walls ☐ Chews furniture ☐ Chews on window frames
☐ Chews clothing/shoes ☐ Gets into trash ☐ Chews on door frames
☐ Other: _____

Does your dog raid the trash or other similar mischief? ☐ Yes ☐ No

Will your dog steal unattended food/objects from tables/counters? ☐ Yes ☐ No

If yes, how have you handled the problem? _____

How does your dog walk on a leash? ☐ Loosely ☐ Pulls a little ☐ Pulls a lot ☐ Never been on a leash

Is your dog protective or possessive of any of the following? (Check all that apply)

- ☐ Food (to other pets) ☐ Toys (to other pets) ☐ Food (to people) ☐ Toys (to people) ☐ Of his/her body
☐ Of owner/family ☐ Of property ☐ Other: _____

Please check all of the following that frighten your dog: ☐ Babies or toddlers ☐ Men ☐ Women

- ☐ School-age children ☐ People in uniform ☐ Water ☐ Unpredictable children ☐ Vacuums ☐ Fireworks
☐ Thunder/Lightning ☐ Loud voices/yelling ☐ Loud noises or bangs ☐ Veterinarian or groomer
☐ Other: _____

Has your dog ever bitten any person? ☐ Yes ☐ No Date of bite incident: _____

Please check all that apply:

- ☐ Snapped (did not make contact) ☐ Bite clothing only ☐ Bite (broke skin)
☐ Minor Bite (but neither drew blood nor left bruising) ☐ Major Bite (broke skin/drew blood/bruising)

Has your dog ever bitten another animal and drawn blood? ☐ Yes ☐ No If yes, when? _____

Please explain _____

Please check the following if your dog has ever done any of the following:

Adult family members ☐ Growled ☐ Barked ☐ Snapped ☐ Bitten ☐ Never

Please explain: _____

Children family members ☐ Growled ☐ Barked ☐ Snapped ☐ Bitten ☐ Never

Please explain: _____

Strangers at door ☐ Growled ☐ Barked ☐ Snapped ☐ Bitten ☐ Never

Please explain: _____

Visiting adults ☐ Growled ☐ Barked ☐ Snapped ☐ Bitten ☐ Never

Please explain: _____

Visiting children ☐ Growled ☐ Barked ☐ Snapped ☐ Bitten ☐ Never

Please explain: _____

Vet or groomer ☐ Growled ☐ Barked ☐ Snapped ☐ Bitten ☐ Never

Please explain: _____

People near his/her area ☐ Growled ☐ Barked ☐ Snapped ☐ Bitten ☐ Never

Please explain: _____

Pedestrians ☐ Growled ☐ Barked ☐ Snapped ☐ Bitten ☐ Never

Please explain: _____

People near his/her food ☐ Growled ☐ Barked ☐ Snapped ☐ Bitten ☐ Never

Please explain: _____

Health, Grooming & Diet

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Does your dog see a veterinarian on a regular basis? (at least once a year) ☐ Yes ☐ No

Which clinics is your dog seen at? _____

Is your dog current on vaccinations? ☐ Yes ☐ No

If no, which ones are due? _____

How does your dog react going to the vet? _____

Does your dog need to be muzzled at the vet? ☐ Yes ☐ No

Does your dog require any medication on a regular basis? ☐ Yes ☐ No

If yes, what kind and for what condition? _____

Does your dog allow you to clip his/her nails? ☐ Yes ☐ No

Does your dog like to be brushed? ☐ Yes ☐ No

Are there places that he/she does not like being brushed or petted? ☐ Yes ☐ No

If yes, where? _____

Has your dog ever been professionally groomed? ☐ Yes ☐ No

If yes, please name the facility _____

Has your dog ever been boarded when you are gone at: ☐ Private boarding facility ☐ Veterinarian ☐ No

If yes, please name the facility _____

Has your dog ever required major surgery? ☐ Yes ☐ No

If yes, when, where and results? _____

Has your dog ever been diagnosed/treated for any of the following? (check all that apply)

- ☐ Heartworm Disease ☐ Lyme Disease ☐ Heart Murmur ☐ Tumors ☐ Epilepsy/Seizures ☐ Skin allergies
☐ Thyroid Disease ☐ Cancer ☐ Arthritis ☐ Cataracts ☐ Irritable bowel ☐ Lupus ☐ Food allergies
☐ Entropion eye ☐ Environmental allergies ☐ Hip/elbow ☐ Dysplasia ☐ Ear infections ☐ Eye infections
☐ Diabetes ☐ Other illness/condition

What brand of food does your dog eat? _____

How much and how often? _____

Would you consider your dog to be a picky eater? ☐ Yes ☐ No

If yes, please explain _____

Does your dog have any allergies/sensitivities to any grains or ingredients ☐ Yes ☐ No

If yes, to what? _____

Is your dog on any flea treatment? ☐ Yes ☐ No

If yes, what kind? ☐ Advantage ☐ Frontline ☐ Revolution ☐ Other: _____

Exercise & Play

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What are your dog's favorite kinds of toys? (check all that apply)

- ☐ Shows no interest in toys ☐ Frisbee ☐ Rocks ☐ Plastic bottles ☐ Tennis/rubber ball ☐ Rope toys
☐ Shoes ☐ Children's toys ☐ Plush/Stuffed toys ☐ Kong ☐ Squeaky toys

Other: _____

What does your dog do with his/her toys? (check all that apply)

- ☐ Carries around in mouth ☐ Shreds/tears apart ☐ Tosses or whips back and forth ☐ Plays "Keep Away"
☐ Chews them ☐ Retrieves for owner ☐ Buries or hides them ☐ Comfort behavior (licking/cuddling/
suckling) ☐ Other: _____

What type of exercise does your dog receive on a regular (several times a week) basis?

- ☐ Accompanies owner jogging ☐ Walking on a leash ☐ Vigorous play ☐ Running on a leash ☐ Swimming
☐ Dog Park ☐ Plays with other dogs ☐ Plays with kids ☐ Plays with adults ☐ Agility or herding work
☐ Accompanies owner walking/hiking ☐ No exercise at all ☐ Dog Day Care
☐ Other: _____

Describe your dog's play style with people (check all that apply)

- ☐ Play's gently ☐ Does not use teeth or body strength ☐ Prefers fetch ☐ Prefers to chase ☐ Plays roughly,
but stops when told ☐ Tends to herd ☐ Tends to nip ☐ Jumps and uses mouth in play ☐ No interest
☐ Plays physically ☐ Games quickly escalate out of control
☐ Other: _____

Describe your dog's play style with other dogs (check all that apply)

- | | |
|--|--|
| ☐ Plays chase with little/no body contact | ☐ Hangs out with dogs rather than play |
| ☐ Plays hard with hip checks/body slams | ☐ Will play with all dogs |
| ☐ Herds/nips others to get them to move | ☐ Can play with more than one dog |
| ☐ Adapts to whatever the other dog is doing | ☐ Barks constantly |
| ☐ Shares toys and plays with other dogs | ☐ Can hang out with more than one dog |
| ☐ Likes to play with smaller dogs | ☐ Aggressive to all dogs, does not play |
| ☐ Has to be in charge of play | ☐ Other: _____ |
| ☐ Likes to play with gentle dogs | |

Other Animals

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Please check all the animals that your dog has lived with:

- ☐ Male dogs ☐ Female dogs
☐ Small Animals ☐ Male cats ☐ Female cats
☐ Livestock ☐ Other: _____

Describe your dog's behavior around other dogs (check all that apply)

- ☐ Never been around dogs ☐ Adores other dogs ☐ Friendly/Playful ☐ Aggressive with all dogs ☐ Bossy
☐ Frightened ☐ Ignores or is indifferent ☐ Gentle/Submissive ☐ Aggressive with same sex dogs
☐ Has bitten another dog and drawn blood ☐ Other: _____

What else would you like us to know about your dog?

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page, providing a guide for writing. There are no margins, text, or other markings on the paper.

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