

DOG/PUPPY SURRENDER PROFILE FORM

Completed form must be submitted at scheduled surrender appointment.



Contact Information (*Required):

*Name of Person/Owner Surrendering _____

*Phone _____ Email _____

*Street Address _____

*City _____ *State _____ *Zip _____

I understand there is a \$40 surrender fee collected at the time of surrender. Yes No

General History:

Why are you surrendering this dog today?

If we could help you resolve the issues surrounding the surrender of this dog would you be interested in keeping your animal? Yes No If yes, stop here and speak with a member of the Rescue Team for assistance.

Dog's Name: _____ Nickname: _____

Age or approximate age: _____ How old was this dog when you acquired him/her? _____

Breed: _____ Color: _____

Is this dog a Male Female Unsure

Has this dog been spayed or neutered? Yes No Unsure

Has this dog been micro-chipped? Yes No Unsure If so, chip # _____

How long have you owned this dog? _____

Including your home, how many homes has this dog had? _____

Where did you acquire this dog?

Toledo Animal Rescue Found as a stray Born in my home Friend/Relative Pet store

Breeder Free-to-good-home ad Another shelter: What shelter? _____

Other _____

Medical History:

Did this dog receive annual exams by a veterinarian? Yes No Unsure

Name of Vet Clinic: _____ Vet Phone: _____

Name of Veterinarian: _____

I agree the Toledo Animal Rescue can contact the Veterinarian for current and past medical information regarding this animal. _____(Initial)

Is this dog current on rabies vaccination? Yes No Unsure

Does this dog have any medical problems or previous injuries that require special attention or a special diet?

Yes No Unsure Explain:_____

Please check all conditions that this dog has been diagnosed with or has been treated for:

- | | | | |
|--|--|---------------------------------------|--|
| <input type="checkbox"/> Allergies | <input type="checkbox"/> Urinary Tract Infection (UTI) | <input type="checkbox"/> Kennel Cough | <input type="checkbox"/> Epilepsy/Seizures |
| <input type="checkbox"/> Thyroid Disease | <input type="checkbox"/> Skin Problems | <input type="checkbox"/> Ringworm | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Liver Disease | <input type="checkbox"/> Kidney Disease | <input type="checkbox"/> Heart murmur | <input type="checkbox"/> Parvovirus |
| <input type="checkbox"/> Heart Worms | <input type="checkbox"/> Obesity | <input type="checkbox"/> Other: _____ | |

Dietary Habits:

What brand of food did this dog eat?

- | | |
|--|--|
| <input type="checkbox"/> Premium brand (Science Diet, Eukanuba) | <input type="checkbox"/> Grocery store brand (Purina, Old Roy) |
| <input type="checkbox"/> Generic brand (Sam's brand, Dollar Store) | <input type="checkbox"/> Home cooked diet |
| <input type="checkbox"/> Prescription Diet – please describe:_____ | |

Which of the following does this dog eat?

- | | | | |
|---|---|--|---------------------------------------|
| <input type="checkbox"/> Dry food only | <input type="checkbox"/> Canned food only | <input type="checkbox"/> Combination of dry and canned | <input type="checkbox"/> Table scraps |
| <input type="checkbox"/> Home cooked diet <input type="checkbox"/> Other_____ | | | |

Do you feed your dog treats? Yes No If yes, what kind?_____

How often was this dog fed? Once daily Twice daily Food always available Other

Personality Profile:

What traits best describe this dog's personality (check all that apply):

- | | | |
|---|--|--|
| <input type="checkbox"/> Very energetic | <input type="checkbox"/> Shy to strangers | <input type="checkbox"/> Shy with some family members |
| <input type="checkbox"/> Talkative | <input type="checkbox"/> Playful | <input type="checkbox"/> Friendly/affectionate to family members |
| <input type="checkbox"/> Independent | <input type="checkbox"/> Affectionate | <input type="checkbox"/> Lap dog – loves attention |
| <input type="checkbox"/> Fearful | <input type="checkbox"/> A loner | <input type="checkbox"/> Stubborn |
| <input type="checkbox"/> Goofball | <input type="checkbox"/> Lazy – Couch Potato | <input type="checkbox"/> Other_____ |

What's this dog's most favorite style of play (check all that apply)?

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Very gentle | <input type="checkbox"/> Enjoys playing fetch | <input type="checkbox"/> Likes to play with other dogs | <input type="checkbox"/> Likes to play with cats |
| <input type="checkbox"/> Will learn tricks for treats | <input type="checkbox"/> VERY energetic and rambunctious | <input type="checkbox"/> Doesn't show a great interest in playing | |
| <input type="checkbox"/> Likes to play with toys <input type="checkbox"/> Other_____ | | | |

Lifestyle & Home Life

Was this dog (check all that apply):

- Indoors except to potty Outdoors during the day, in at night Outside 24 hours
 In and out throughout the day: hours outside: _____ hours inside: _____

This dog sleeps (check all that apply):

- Inside, on the floor Inside, on a dog bed Inside, on a chair or sofa
 Inside, in bed with adults Inside, in bed with children In a crate
 In a garage or barn Outside, in a dog house Outside, on ground or under porch

Is this dog housebroken?

- Yes, completely No, has frequent accidents Mostly, has occasional accidents
 Only has accidents while left alone for long periods: How long before accident: _____
 Accidents are urine only Accidents are bowel movements only

While outside, this dog was: (check all that apply)

- Not confined, allowed to run loose 6'-8' privacy fence 3'-4' chain link fence
 Fenced run-size: _____ft. x _____ft. Confined in garage Tethered by chain or cable

Have you had any problems keeping this dog confined? (check all that apply)

- No, stays in yard Yes, jumps fence Yes, digs to get out Other _____

Is this dog ever crated? (check all that apply) No Yes, for car rides

- Yes, when left alone for _____ hours at a time Yes, daily-from _____ to _____

If crated, this dog was: (check all that apply)

- Calm, sleeps Anxious, whines, barks, drools Anxious at first, then calms down

When crated, did you do any of the following: (check all that apply)

- Lights on TV or radio on Crate covered

What kind of exercise did this dog receive? (check all that apply)

- Daily walk, on lead Taken to off-leash park or the country to run loose for a period
 Placed on cable or run outside Walked 1-3 times per week, on lead
 Put out in fenced yard No regular exercise period

Has this dog regularly been around children? Yes No Unsure

If so, how old are the children? _____

How does this dog behave around children? (check all that apply)

- Submissive Playful Calm Avoids children
 Play gets out of control Protective Aggressive Aloof
 Easygoing Fearful Friendly Nervous
 Quiet Shy Noisy Other _____

How does this dog behave around adults? (check all that apply)

- Submissive Playful Calm Avoids children Play gets out of control
 Protective Aggressive Aloof Easygoing Fearful
 Friendly Nervous Quiet Shy Noisy
Other _____

Describe how this dog behaves when people come to visit: (check all that apply)

- Quiet Excited or friendly Barks at doorbell or knocking at the door
 Runs and hides, doesn't come out Barks at people once they are inside
 Jumps up on them Sticks close to family members while visitors are around
 Continually pesters visitors for attention Starts out unsure, then gradually warms up and is friendly
 Protective, growls when visitors reach toward a family member
 Other _____

How does this dog behave around other dogs? (check all that apply)

- Never been around other dogs Friendly, no fighting Fight over certain situations or possessions
 This dog picked on other dogs Stiff, Nervous Didn't really care, avoided other dogs
 Other dogs picked on this dog Did not get along at all, constantly fought

How does this dog behave around cats? (check all that apply)

- Never been around cats Friendly, no fighting Fight over certain situations or possessions
 This dog picked on cats Stiff, Nervous Didn't really care, avoided one another
 Cats picked on this dog Did not get along at all, constantly fought

This dog knows the following commands: (check all that apply)

- Sit Stay Come Down Heel Shake Fetch Other _____

How does this dog behave on leash? (check all that apply)

- Has experience, walks calmly, no pulling Pulls occasionally, but mostly does well
 Pulls constantly Fights the lead, bites and struggles No experience on leash

What is this dog afraid of? (check all that apply)

- Thunderstorms, Loud Noises Vacuums Being Alone Men Women Children
 Strangers Fast Movement Car Rides Restraint Crates Dogs Cats Vet
Other _____

How has is this dog been disciplined? (check all that apply)

- Yelling, scolding Body gestures, arms waving, etc. Physical contact-hitting, swatting, kicking
 Locked away for time-out Thrown outside Physically taken over to mess, nose rubbed in it
 Discipline handed out when the mess is found Ignore it, clean up mess, try to catch the dog in the act to teach corrective behavior

Does this dog have any of the following behaviors you consider a problem? (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Barks too much | <input type="checkbox"/> Jumps fences |
| <input type="checkbox"/> Runs away when escape | <input type="checkbox"/> Chews up household items |
| <input type="checkbox"/> Chews up plants or outdoor structures | <input type="checkbox"/> Unable to house train |
| <input type="checkbox"/> Sprays/marks with urine inside the house | <input type="checkbox"/> Separation anxiety |
| <input type="checkbox"/> Digging | <input type="checkbox"/> Too bold and rough to deal with, nips during play |
| <input type="checkbox"/> Growls or bites when food, treats or toys are present | <input type="checkbox"/> Jumps up on people |
| <input type="checkbox"/> Under foot constantly Insecure, too needy | <input type="checkbox"/> Aggressive with strangers |
| <input type="checkbox"/> Aggressive with children | <input type="checkbox"/> Unpredictable, becomes aggressive for no reason |
| <input type="checkbox"/> Aggressive toward other animals | <input type="checkbox"/> Fearful |
| <input type="checkbox"/> Kills other animals: Type_____ | <input type="checkbox"/> Other_____ |

If you checked any of the above, please elaborate: _____

If this dog has been aggressive towards people or animals, how would you describe the aggression? (check all that apply)

- Yes, has attacked or bit people, animals, or both.
- Yes, has growled at or lunged at people, animals, or both.

Please describe in detail any answers of yes: _____

No, has shown no aggression towards animals or people and I certify that, to the best of my knowledge, this animal has not bitten any person or animal, nor has it shown signs of aggression to any person or animal.
_____(Initial)

Please feel free to add additional comments that you think would be helpful to the Rescue Team staff, potential adopters, or a future owner.

RELINQUISHMENT OF OWNERSHIP AND GENERAL RELEASE OF ALL CLAIMS

My signature below certifies that I am the owner of, or have legal authority to surrender, the animal described above to the Toledo Animal Rescue. I certify that I have disclosed all information about the animal concerning health, behavior, history, and that all of the above statements and information are true and correct. I hereby relinquish and surrender all rights and ownership of the animal, and any right to information regarding the animal. I understand that Toledo Animal Rescue cannot guarantee that the animal will be placed for adoption.

Signature _____ Date _____

I hereby agree and understand that I have voluntarily relinquished all ownership and rights to the animal, and that Toledo Animal Rescue has the sole and exclusive right to make all decisions and take all actions related to the animal. I further agree to forever discharge and release Toledo Animal Rescue from all claims, liability, and damages related to the animal in any way.

Signature _____ Date _____