

Dog Personality Information



This sheet provides us with information about how your dog behaved in many different circumstances while he or she was living with you. Your dog is likely to behave in similar ways in its new home and this information will help us find the best fit possible in a new home.

For office use only:

Animal # _____

What is the main reason you are surrendering this dog to us? _____

How long have you had this dog? _____ Where did you get your dog? _____

What veterinary clinic(s) has your dog visited? _____

Does your dog have any past or present medical conditions? _____

Please check all applicable dog behaviors in the following situations:

	Friendly	Afraid	Shows teeth/ growls	Snaps	Bites	Do not know
Men						
Women						
Children 8+						
Children 8 -						
Babies						
Dog						
Cat						

If a bite drew blood when was the most recent occurrence? _____

Please explain the circumstances of any snapping or biting behavior in detail _____

Does your dog ever uncontrollably chase or attempt to chase any of the following?

Joggers Bicycles Cars/ Motorcycles Animals Doesn't Chase

Where does your dog spend most of his/ her time?

Inside house, free Inside house, crated Outside house, in yard Outside house, in kennel Outside house, tied

Has your dog escaped your property 2 or more times in the last 6 months? Yes No

How is your dog secured while outside?

6 ft fence 4 ft fence or under Tie out Invisible Fence No boundary Other _____

Turn over



Does your dog have any bad habits you would like the new owner to know about? _____

Does your dog have any good habits you would like the new owner to be aware of? _____

Is your dog scared of anything? _____

What type of food does your dog eat? Dry Wet

Brand _____

Is your dog housebroken? Yes No Mostly

What kind of exercise is your dog used to?

Dog Park Walks Runs Daycare Backyard Other _____

How does your dog react when you or another family member...	Never tried	No reaction	Allows	Lunges, Growls	Bites
Pet him/her or touch food bowl while eating					
Pet him/her or touch rawhide, pig ear, or similar item while chewing					
Pet him/her or touch while they have a stolen item					
Pet him/her move him/her while sleeping					
Brushes? Handles Feet? Cleans Ears?					
Enters the house or yard?					
Approaches or reaches toward the dog?					
Take him/ her to the veterinarian's office?					
Take him to the groomer?					

If you answered Lunges/ Growls or Bites to any of the previous questions please explain further: _____

What other animals has your dog lived with?

No other animals in household Dogs Cats Small Animals Other

When your dog plays does he/she usually:

jump tug chase wrestle playfully growl bites lightly bites hard

Is your dog allowed on the furniture? yes no

Does your dog have problems riding in the car? yes no If yes, Explain _____

Has your dog ever attended obedience training classes? yes no

Has your dog ever been walked on a leash? yes no