

Kindred Souls Foundation
Dog Intake Form
Free PDF fill-in: <http://www.pdfescape.com/>

General Information

Your name _____ Date _____

Address _____ Phone _____

Email address _____ Alt Phone _____

Dog's name _____ Age _____

Dog's birth date _____ Dog's weight _____

Is the dog spayed/neutered? Yes No Unsure Dog's sex Male Female

Does the dog have a microchip? Yes No Unsure Dog's Breed(s) _____

Microchip Company: _____ Microchip # _____

Has dog bitten in the last 10 days? Yes No Unsure Dog's Color(s) _____

If yes, please explain:

History

Why are you surrendering the dog?

If we could help you resolve this issue would you be interested in keeping the dog? Yes No

How long have you owned this dog? _____

Including yours, how many homes has this dog had? _____

Where did you get this dog?

- | | |
|---|--|
| <input type="checkbox"/> A shelter | <input type="checkbox"/> Friend/relative |
| <input type="checkbox"/> Breeder | <input type="checkbox"/> Pet store |
| <input type="checkbox"/> Found as a stray | <input type="checkbox"/> Born in my home |
| <input type="checkbox"/> Newspaper Ad | <input type="checkbox"/> Other _____ |

Medical History

Did the dog see a veterinarian at least once per year? Yes No Unsure

If so, which clinic? _____

Is the dog current on vaccinations? Yes No Unsure

Medical History continued:

Has this dog ever had surgery? Yes No Unsure

If yes, please explain:

Has the dog been diagnosed with and/or treated for any of the following: *(check all that apply)*

- | | |
|--|--|
| <input type="checkbox"/> Upper respiratory infection | <input type="checkbox"/> Thyroid disease |
| <input type="checkbox"/> Allergies | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Heart murmur | <input type="checkbox"/> Urinary tract infection |
| <input type="checkbox"/> Tumors | <input type="checkbox"/> Leg or bone surgery |
| <input type="checkbox"/> Epilepsy or seizures | <input type="checkbox"/> Unsure |
| <input type="checkbox"/> Organ failure | <input type="checkbox"/> Other _____ |

Is your dog receiving any form of flea control? Yes No Unsure

If yes, which brand?

Does the dog have an illness or condition we should know about? Yes No Unsure

If yes, please explain:

Dietary Habits

What brand and blend of food is this dog currently eating? _____

Which does this dog eat? Dry only Canned only Combination of dry & canned

People food Unsure

What type of treats is this dog currently receiving? _____

How often is this dog fed? Food always available Designated mealtimes

Lifestyle and Home Life

Where do you leave the dog when he/she is alone?

Where do you leave the dog when you are at home?

What is the longest period of time the dog spends alone?

For how many hours each day does a person interact with the dog?

Lifestyle and Home Life continued:

Where does the dog sleep at night?

Do you trust the dog loose indoors, unsupervised? Yes No

If no, why?

Is the dog potty-trained? Yes No

If no, please explain:

How does the dog tell you he/she needs to go potty?

Have you ever used a crate for the dog? Yes No

When & why?

Do you trust the dog outside unsupervised? Yes No

If no, why?

Please describe what daily exercise the dog is currently given:

What type of outside confinement do you have?

If you have a fence what type is it? Wood Cyclone Other

If you have a fence, how tall is it?

Has the dog received obedience training? Yes No Unsure

What commands does the dog know?

Does the dog travel well in the car? Yes No Unsure

Where does the dog stay when you go on vacation?

Household History

What types of animals has the dog lived with? (please include sex, species, etc.)

Please describe how the animals got along:

Does the dog spend time unsupervised with the other animals? Yes No

What types of animals has the dog visited/played with?

When is the dog not good with other animals?

Has the dog ever seen horses or livestock? Yes No Unsure

If yes, what was his/her reaction?

With what ages of children has the dog lived?

With what ages of children has the dog visited?

When is the dog not good with children?

Please provide any other information about how the dog acts around children:

Personality

How would you describe the dog most of the time? (*check all that apply*)

- | | |
|---|---|
| <input type="checkbox"/> Friendly to family | <input type="checkbox"/> More like a cat |
| <input type="checkbox"/> Very active | <input type="checkbox"/> Fearful |
| <input type="checkbox"/> A clown | <input type="checkbox"/> Fearless |
| <input type="checkbox"/> Couch potato | <input type="checkbox"/> Solitary |
| <input type="checkbox"/> Friendly to visitors | <input type="checkbox"/> Affectionate |
| <input type="checkbox"/> Playful | <input type="checkbox"/> Independent |
| <input type="checkbox"/> Aloof | <input type="checkbox"/> Shy to visitors |
| <input type="checkbox"/> Withdrawn | <input type="checkbox"/> Quiet |
| <input type="checkbox"/> Shy to family | <input type="checkbox"/> Lap dog |
| <input type="checkbox"/> Talkative | <input type="checkbox"/> Good with women |
| <input type="checkbox"/> Good with men | <input type="checkbox"/> Fearful / shy around women |
| <input type="checkbox"/> Fearful / shy around men | <input type="checkbox"/> Other _____ |

Personality continued:

What are the dog's special qualities?

How would you describe the dog's personality?

List 3 things that the dog loves:

- 1.
- 2.
- 3.

What are his/her favorite activities?

- 1.
- 2.
- 3.

What is the dog's reaction to visitors at the door?

How long does it take him/her to calm down when someone comes to the house?

Has the dog ever nipped at anyone? Yes No Unsure

If yes, who?

If yes, under what circumstances?

Has he/she ever bitten and drawn blood? Yes No Unsure

If yes, please explain:

Is there any part of the dog's body that he/she doesn't like touched? Yes No Unsure

If yes, please explain:

What has the dog done to show you he/she doesn't like it?

Personality continued:

Have you ever petted or approached him/her when he/she was eating? Yes No

If yes, what was the response?

Is he/she better or worse with particular people or children? Yes No

If yes, please explain:

Can you take trash or food out of the dog's mouth if he/she has stolen something? Yes No

Has the dog done anything for which you have had to discipline him/her? Yes No

If yes, please explain:

If yes, please describe the discipline used:

Has the dog ever killed a cat or any other animal? Yes No Unsure

Does the dog chase any of the following? (*check all that apply*)

- Adults
- Kids
- Squirrels

- Cats
- Bicycles
- Other _____

Is the dog aggressively protective of the following? (*check all that apply*)

- Food
- Home
- Yard

- Family
- Bed
- Car
- Other _____

Is there anything else you would like to tell us about this dog?