

Kindred Souls Foundation  
Dog Intake Form

**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) \_\_\_\_\_

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"/> None                    |
| <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 is this dog's favorite brand of food? \_\_\_\_\_

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

People food  Unsure

What type of treats does this dog enjoy? \_\_\_\_\_

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 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 was 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*)

- Friendly to family
- Very active
- A clown
- Couch potato
- Friendly to visitors
- Playful
- Aloof
- Withdrawn
- Shy to family
- Talkative

- More like a cat
- Fearful
- Fearless
- Solitary
- Playful
- Affectionate
- Independent
- Shy to visitors
- Quiet
- Lap dog
- Other \_\_\_\_\_

**Personality continued:**

What are the dog's special qualities?

How would you describe the dog's personality?

List 5 things that the dog loves:

- 1.
- 2.
- 3.
- 4.
- 5.

What are his/her favorite activities?

- 1.
- 2.
- 3.
- 4.
- 5.

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:*

**Personality continued:**

*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?