



## INCOMING DOG PROFILE

Please fill this out so we can find the best home for your dog!

**Dog's Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Breed:** \_\_\_\_\_

Where did you get the dog from?: \_\_\_\_\_

1. Please provide the following information to help us place the dog in an appropriate adoptive home.

2. How many hours a day was the dog kept inside? \_\_\_\_\_ Where? \_\_\_\_\_

3. How many hours a day was the dog kept outside? \_\_\_\_\_ Where? \_\_\_\_\_

4. How many hours a day was the dog alone? \_\_\_\_\_ Where? Crate  Run of house  Room

5. How did s/he behave when left alone? (ex. destructive, barker, chews, etc) \_\_\_\_\_

6. Has s/he lived with: Men?  Yes  No Women?  Yes  No Children?  Yes  No

If yes, number of children \_\_\_\_\_ Ages \_\_\_\_\_

7. What other pets has s/he lived with: Cats?  Yes Dogs?  Yes Other? \_\_\_\_\_

8. How does s/he react to dogs on walks? Greets  Barks  Growls  Runs away

9. How does s/he react to strangers on walks? Greets  Barks  Growls  Runs away

10. Is s/he afraid of any particular situations or things (such as riding in cars, thunderstorms, vacuum cleaners)? If yes, please explain situations and reaction. \_\_\_\_\_

11. Does s/he ever exhibit negative behavior (growling, snarling or snapping) with respect to strangers in your home, yard or public places, or around food or toys? If yes, please describe. \_\_\_\_\_

12. Is s/he protective of any one person or object? Explain: \_\_\_\_\_

13. Has s/he ever bitten anyone?  Yes  No If Yes Explain: \_\_\_\_\_

14. Does s/he need to be muzzled when at the vet or the groomer?  Yes  No

15. Has s/he had any obedience training?  Yes  No If yes, which commands does s/he know and what words or signals do you use for each command?

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16. Does s/he pull on leash?  Yes  No With Harness?  Yes  No
17. Favorite toy: \_\_\_\_\_ Favorite activity: \_\_\_\_\_
18. How would you describe his/her activity/energy level?  High  Medium  Low  Couch Potato
19. Is s/he housebroken?  Yes  No If No how long was she left alone? \_\_\_\_\_
20. Please tell us anything else we should know about the dog before placing him/her:

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21. Would you keep the dog if we could help resolve behavioral, training or other issues?  Yes  No
22. What brand and type (dry/canned) of food do you feed the dog? \_\_\_\_\_
23. How often and how much do you feed the dog? \_\_\_\_\_
24. Has the dog been neutered?  Yes  No Is the dog current on its vaccinations?  Yes  No
25. Does the dog take any medications? \_\_\_\_\_
26. Are you providing a copy of the dog's medical records at this time?  Yes  No **If no, please provide below.**
27. When was the last time (around) your dog has been to the vet? \_\_\_\_\_

**Authorization to Release of Veterinary Records.**

Please list the name, address and phone number of the dog's veterinarian:

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The undersigned does hereby authorize Quincy Animal Shelter to contact the veterinarian named above and does hereby authorize and instruct such veterinarian to release to the Quincy Animal Shelter all medical records for the above described dog.

Owner signature: \_\_\_\_\_

Please print name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

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