



# Canine Personality Profile

To help us place your pet in an environment best suited to its needs, we ask you to complete this profile as completely as you can.

Dog's Name: \_\_\_\_\_ Nickname(s): \_\_\_\_\_

Age: \_\_\_\_\_ Breed: \_\_\_\_\_  Male  Female

How long have you owned/had the dog? \_\_\_\_\_ yrs / mos Is your dog altered/fixated?  Yes  No

Where did you get/obtain your dog? \_\_\_\_\_

Why are you surrendering your dog? \_\_\_\_\_

Has your dog ever bitten anyone?  No  Yes, please explain \_\_\_\_\_

Has your dog ever been deemed vicious or been in bite quarantine (you are legally required to disclose this information)?

No  Yes, please explain \_\_\_\_\_

Does your dog gets along with?  Men  Women  Children  Male dogs  Female dogs  Cats  Fowl  Livestock

From your experience, what does your dog **NOT** get along with?  Men  Women  Children  Male dogs  Female dogs  Cats  Fowl  Livestock  Was only pet

Did your dog live with children?  No  Yes, ages \_\_\_\_\_

Should your dog go to a home with children?  No  Yes, ages \_\_\_\_\_

What best describes your dog's temperament?  Active  Aloof  Calm  Cuddly  Friendly  Hyperactive

Playful  Shy  Fearful  Other \_\_\_\_\_

What words does your dog understand?  Sit  Stay  Down  Off  Come  Leave it  Drop  No  Fetch

Okay  Heel  Quiet  Treat/cookie  Doesn't know any commands  Other \_\_\_\_\_

Is your dog permitted to sit and/or sleep on the furniture?  No  Yes

Does your dog ride well in the car?  No  Yes Does he get car sick?  No  Yes

Is your dog housetrained?  No  Yes

How does your dog let you know he needs to go outside? \_\_\_\_\_

Does your dog have accidents in the house?  No  Yes, how often?  Daily  Few times a week  Few times a month

How long can your dog "hold it"?  Not at all  1-3 hrs  4-8 hrs  9-12 hrs  12+ hrs

Is your dog crate trained?  No  Yes, how long did your dog spend in the crate each day? \_\_\_\_\_

How long is your dog left alone, without people?  Never  1-3 hrs  4-8 hrs  9-12 hrs  12+ hrs

When alone, is your dog:  Outdoors  Free in house  Confined to a room  Crated

Other (please explain) \_\_\_\_\_

When left alone does your dog:  Destroy household items  Urinate  Defecate  Bark  Cry  None

If your dog destroys household items check all that apply:  Chews woodwork/walls/doors  Chews furniture  Chews toys

Chews clothing/shoes  Other \_\_\_\_\_

Does your dog have separation anxiety?  No  Yes, please explain\_\_\_\_\_

Does your dog have fears?  Strangers  Baths  Vacuum  Thunder  Other\_\_\_\_\_

How does your dog react to bathing/handling such as petting or hugging?\_\_\_\_\_

Are there areas on your dog's body he **does NOT** like touched?  Ears  Mouth  Tail  Collar  Rear end  
 Paws/nails  Can be touched anywhere

*If touched in the above place(s), how does your dog respond?*  Moves away  Shows teeth  Growls  Snaps  Bites  
 No reaction  Doesn't react negatively when touched anywhere

How do you keep your dog secure?  Fenced yard (fence height\_\_\_\_\_)  Kennel  Crate  Garage  Cable dog run  
 Tied out  Invisible fence  Other\_\_\_\_\_

Does your dog jump over or dig under fences?  No  Yes, please specify\_\_\_\_\_

Does your dog run away or dart outdoors if given the opportunity?  No  Yes

How does your dog react when you or another family member... (check all that apply)	No Reaction	Never Tried	Allows	Lunges	Shows Teeth	Growls	Snaps	Bites	Other (please specify)
Touch food bowl while eating									
Touch bone, rawhide, toy while chewing									
Touch a stolen food item									
Touch a toy in his mouth									
Touch/move him while sleeping									
Push/pull him off of furniture									
Approach him while next to another family member									

Does your dog have any health issues?  No  Yes, please specify\_\_\_\_\_

Has your dog ever had surgery?  No  Yes, please specify\_\_\_\_\_

How does your dog behave during visits to the vet?\_\_\_\_\_

May we obtain veterinary records?  No  Yes, Vet name & phone \_\_\_\_\_

What brand of food does your dog eat?\_\_\_\_\_

How many meals a day?\_\_\_\_\_ How much does your dog eat per meal?\_\_\_\_\_

Are there any special issues/qualities about your dog that we should understand that will help us to place the dog into a new home?\_\_\_\_\_

What is your dog's favorite toy and favorite activities?\_\_\_\_\_

What type of home would you recommend for your dog?\_\_\_\_\_

May the new owner/s contact you for more information?  No  Yes, Name & phone \_\_\_\_\_