Dog Name: ______________  Age: __________  How long have you owned him/her? __________

(check all that apply)

[ ] Male—Neutered? [yes] [no]  [ ] Female—Spayed? [yes] [no]  Age at alteration? __________

**History**
Where did you get the dog from originally? ___________________________  Breed? ___________________________

Housebroken? [yes] [no]  [somewhat] - (please explain) ___________________________
Was the dog crate trained? [yes] [no] - (if yes, how long confined to crate?) ___________________________

Where is the dog during the day? ___________________________  Evening? ___________________________

How does the dog react while left alone? ___________________________

When outside, the dog is? (circle all that apply)

[Free Roam]  [Dog Pen]  [Fenced]  [Chained]  [Overhead trolley run]
[Invisible Fence]  [Leash]  [Other] - (explain) ___________________________

Hours per day dog is left alone? ______________  Where is the dog at that time? ___________________________

How many adult men live in the house? _________  How many adult women live in the house? _________

How many Children? ______________  Please list ages: ___________________________

**Personality & Behavior**
How is the dog with children? (circle all that apply)

[ Loving ]  [ Gentle ]  [ Rough ]  [ Chases ]  [ Playful ]  [ Nips ]
[ Knocks down ]  [ Growls at them ]  [ Bites ]  [ Corners them ]

Any concerns regarding this dog with children? ___________________________
Is protective of: (circle all that apply)
[Home] [Family] [Toys] [Food]

Please describe what protective behavior: ____________________________________________

Has the dog ever bitten anyone? [Yes] [No] - If yes, did it break skin? [Yes] [No]
List dates and explain incidents(s) __________________________________________________

Has the dog ever **attempted** to bite anyone? [Yes] [No] - If yes, explain_____________________

Has the dog ever growled at anyone? [Yes] [No] - If yes, explain___________________________

Do other dogs currently reside in the home? [Yes] [No] - If yes, how many? ________________
How is the dog with other dogs? ____________________________________________

Do cats currently reside in the home? [Yes] [No] - If yes, how many? ________________
How is the dog with cats?_______________________________________________________

Has this dog ever attacked and hurt another animal (including wildlife)? [Yes] [No]
(If yes, how many) ____________________________

What reaction does the dog have when **visitors** come over? ________________________________

What reaction does the dog have when **strangers** approach? ________________________________

Can you remove an object from his/her mouth? [Yes] [No] - If no, explain how the dog reacts

Can you take his/her food away while he/she is eating? [Yes] [No] - If no, explain how the dog reacts

Does he know any commands? Please list: _____________________________________________

What bad habits does this dog have? Please list: __________________________________________
How do you discipline this dog? Please explain: _____________________________________________________________
______________________________________________________________________________________________

How does the dog react to discipline? Please explain: _____________________________________________________________
______________________________________________________________________________________________

Medical History: Please fax or mail back the most current medical records with this surrender profile

Current Veterinarian: ___________________________ Phone #: ___________________________

Date of last DHPP vaccine: ___________________________ Date of last Rabies vaccine: ___________________________

Please list any current medications, including heartworm / flea preventative: ___________________________
______________________________________________________________________________________________

Date that any of above were given: ___________________________

Please list any significant health issues: ___________________________
______________________________________________________________________________________________

Reason for Surrender:
______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________

If we could not place this dog due to our adoption criteria, would you take the dog back?  [Yes]  [No]

Geauga Humane Society requests a minimum donation of $50 per animal to provide food, shelter, and veterinary care. Please indicate the amount of your tax deduction contribution you would donate upon surrendering your dog to Rescue Village.

[$50.00]  [$75.00]  [$100.00]  [Other]