



# CHAMPAIGN COUNTY HUMANESOCIETY

## Dog Relinquishment Questionnaire

Please complete this form as thoroughly and honestly as possible. We strive to give all of the animals at the Champaign County Humane Society the best care possible and in completing this form accurately, you can help us achieve that goal.

### OWNER INFORMATION:

Full Name: \_\_\_\_\_  
Last First M.I.

Maiden Name or other names used: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City State Zip code

Phone Number: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

Have you ever adopted an animal from us?  Yes  No  Unsure  
Have you ever relinquished an animal to us?  Yes  No  Unsure

### ANIMAL INFORMATION:

#### General History:

Why are you surrendering your pet today? \_\_\_\_\_  
\_\_\_\_\_

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

Age or approximate age: \_\_\_\_\_ How long have you owned this dog? \_\_\_\_\_

Breed or breed mix: \_\_\_\_\_

Is this dog a:  Male  Female  Unsure  
Has this dog been spayed or neutered?  Yes  No  Unsure  
Has this dog been microchipped?  Yes  No  Unsure

#### Where did you acquire this dog?

CCHS  Another shelter  Found as a stray  
 Friend/relative  Pet store  Breeder  Newspaper ad  
 Born in my home  Craigslist  
 Other \_\_\_\_\_

If you obtained this animal from another shelter, breeder, or pet store, provide name and location: \_\_\_\_\_  
\_\_\_\_\_

**Medical History:**

Name of Veterinary Clinic: \_\_\_\_\_ Date of last exam: \_\_\_\_\_

Are the Veterinary records in your name?  Yes  No

If no, whose name would they be under? \_\_\_\_\_

Does this dog have any medical problems?  Yes  No  Unsure

If you answered yes, please explain: \_\_\_\_\_

Is this dog currently on medication?  Yes  No  Unsure

List medications here: \_\_\_\_\_

Does your dog need to be on a special diet?  Yes  No  Unsure

If you answered yes, what type of special diet? \_\_\_\_\_

Please check all conditions that your dog has been diagnosed with or has been treated for:

- |  |  |                                       |  |
|--|--|---------------------------------------|--|
| <input type="checkbox"/> Allergies       | <input type="checkbox"/> Urinary tract Infection | <input type="checkbox"/> Kennel Cough | <input type="checkbox"/> Epilepsy/Seizures |
| <input type="checkbox"/> Thyroid Disease | <input type="checkbox"/> Skin Problems           | <input type="checkbox"/> Ringworm     | <input type="checkbox"/> Diabetes          |
| <input type="checkbox"/> Organ Failure   | <input type="checkbox"/> Heart Murmur            | <input type="checkbox"/> Parvo        | <input type="checkbox"/> Heartworm         |
| <input type="checkbox"/> Other: _____    |  |                                       |  |

Does your dog display signs of separation, thunderstorm or firecracker anxiety?  Yes  No

If yes, please explain: \_\_\_\_\_

How does this dog behave at the vet's office?

- Calm  Anxious  Nips or growls  Highly stressed/must be muzzled

How does this dog do riding in the car? (Mark all that apply)

- Calm, relaxed  Anxious

**Personality Profile:**

Check all traits that describe your dog's personality:

- |   |   |                                  |                                   |                                      |
|---|---|----------------------------------|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Very energetic | <input type="checkbox"/> Very talkative | <input type="checkbox"/> Shy     | <input type="checkbox"/> Playful  | <input type="checkbox"/> Independent |
| <input type="checkbox"/> Affectionate   | <input type="checkbox"/> Lap dog        | <input type="checkbox"/> Fearful | <input type="checkbox"/> Stubborn | <input type="checkbox"/> Goofball    |
| <input type="checkbox"/> Other: _____   |   |                                  |                                   |                                      |

What is your dog's favorite style of play? (check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Very gentle                              | <input type="checkbox"/> Enjoys playing fetch            |
| <input type="checkbox"/> Will learn tricks for treats             | <input type="checkbox"/> VERY energetic and rambunctious |
| <input type="checkbox"/> Doesn't show a great interest in playing | <input type="checkbox"/> Loves to play with toys         |
| <input type="checkbox"/> Other: _____                             |  |

**Lifestyle and Home Life:**

Was this dog: (check all that apply)

- Indoors except to potty  Outdoors during the day, in at night  Outside 24 hours  
 In and out throughout the day

How often does this dog urinate or defecate in an inappropriate place? (check all that apply)

- Never  2-3 times per week  The dog has accidents everyday  Occasionally has accidents  
 Accidents are urine only  Accidents are feces only

Have you had any problems keeping this dog confined? (check all that apply)

- No, stays in yard       Yes, jumps fence       Yes, digs to get out

Was this dog ever crated? (check all that apply)

- No       Yes, when left alone for \_\_\_\_ hours

If crated, this dog was: (check all that apply)

- Calm, sleeps       Anxious, whines, barks drools       Anxious at first, then calms down  
 Has accidents in crate       Tries to escape from crate  
 Cannot be crated (why?) \_\_\_\_\_

What kind of exercise did this dog receive? (check all that apply)

- Daily walk on lead       Walked 1-3 times per week on lead       Taken off leash in park/ country  
 Placed on cable or run outside       Put out in fenced yard       No regular exercise

Has this dog been around children?

- Yes       No       Unsure

If yes, please indicate the age range of the children:

- 0-2 years old       2-5 years old       6-10 years old       11-18 years old

How does this dog behave around children? (check all that apply)

- Very loving       Playful       Calm       Avoids children  
 Protective       Acts aggressively (please explain): \_\_\_\_\_

Other: \_\_\_\_\_

How does this dog act around women? (check all that apply)

- Very loving /obedient       Playful       Calm       Avoids certain adults  
 Protective       Acts aggressively (please explain): \_\_\_\_\_

Other: \_\_\_\_\_

How does this dog act around men? (check all that apply)

- Very loving /obedient       Playful       Calm       Avoids certain adults  
 Protective       Acts aggressively (please explain): \_\_\_\_\_

Other: \_\_\_\_\_

Describe how this dog acts when people come to visit: (check all that apply)

- Quiet       Excited/friendly       Jumps on them       Barks at doorbell or knock on door  
 Fearful       Growls       Nips or bites       Barks at people once inside  
 Pestors for attention       Protective of family       Starts out unsure but warms up

Other: \_\_\_\_\_

Describe how this dog behaves around other **dogs** IN the home: (check all that apply)

- There were no other dogs in the home       Friendly/Playful       Avoids other dogs  
 Fights during certain situations (please explain): \_\_\_\_\_

Acts aggressively (please explain): \_\_\_\_\_

Is possessive of certain items (please explain): \_\_\_\_\_

How does this dog behave around unfamiliar dogs? (check all that apply)

- Never been around other dogs     Friendly/Playful     Avoids other dogs  
 Fights during certain situations (please explain): \_\_\_\_\_  
 Is possessive of certain items (please explain): \_\_\_\_\_  
 Aggressive to all other dogs     Other: \_\_\_\_\_

Describe how this dog behaves around **cats** in the home: (check all that apply)

- Playful/friendly     Avoids cats     Chases cats  
 Acts aggressively (please explain): \_\_\_\_\_  


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 Is possessive of certain items (please explain): \_\_\_\_\_  
 There were no cats in the home

My dog consistently responds to the following commands: (check all that apply)

- Sit     Stay     Come     Down  
 Heel     Shake     Fetch     Other: \_\_\_\_\_

How does this dog behave on leash? (check all that apply)

- Walks calmly     Pulls occasionally     Pulls constantly  
 Has never been on a leash     Fights the lead, bites and struggles

Does this dog have any of the following behaviors you consider a problem? (check all that apply)

- Barks too much     Jumps fences     Runs away     Chews up household items  
 Chews up plants     Unable to housetrain     Marks territory     Destroys outside structures  
 Digging     Plays too rough     Growls or bites     Fearful  
 Guards toys     Guards food     Too needy     Jumps on people  
 Aggressive w/strangers     Aggressive w/children     Aggressive with animals  
 Unpredictable, becomes aggressive for no reason     Kills other animals

Other: \_\_\_\_\_

Has this dog ever been aggressive towards people or animals? (check all that apply)

- Yes, has attacked or bit people     Yes, has attacked or bit other dogs  
 Yes, has attacked or bit a cat     Yes, has growled/lunged at people  
 Yes, has growled/lunged at other dogs     Yes, has growled/lunged at cats  
 No, has shown no aggression towards people or other animals

Tell us your favorite characteristic about your dog? \_\_\_\_\_

Which of the following does your dog eat?

- Dry food only     Canned food only     Combination of dry and canned  
 Other: \_\_\_\_\_

Please feel free to add additional comments that you think would be helpful to shelter staff or potential adopters:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Thank you for taking the time to fill out this form, it will help us find the right home for this animal*