

Small Mammal 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.

Address: _____
Street Address
City
State
Zip code

Phone Number: (____) _____ Email Address: _____

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

ANIMAL INFORMATION:

General History:

Why are you surrendering your pet today? _____

Pet's Name: _____ Age or approximate age: _____

Breed or breed mix: _____

How long have you owned this animal? _____

Is this animal: Male Female Unsure
 Has this animal been spayed or neutered? Yes No Unsure

Where did you acquire this animal?

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

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

Medical History:

Have this animal ever been to a vet? Yes No Unsure
 If yes, name of Veterinarian: _____ Date of last exam: _____
 Does this animal have any medical problems? Yes No Unsure
 If you answered yes, please explain: _____

Is this animal currently on medication? Yes No Unsure

List medications here: _____

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

- Allergies Urinary tract Infection Dental problems Gastrointestinal problems
 Skin Problems Ringworm Ear infections
 Other: _____

Lifestyle and Home Life:

What sort of housing did this animal have:

- Cage with solid floor Cage with wire floor Aquarium
 Other: _____

Where was the cage located?

- Inside the home Outside Outside, but in a barn or shed
 Outside on a porch

What sort of bedding material was in the animal's cage?

- Wood shavings (pine or cedar) Paper-based litter
 Other: _____

What have you been feeding your animal?

- Commercial diet Hay Fresh vegetables
 Other: _____

Personality Profile:

Check **all** traits that describe your animal's personality:

- Very energetic Shy with strangers Likes to be held
 Playful Independent Affectionate Very friendly
 Fearful Aggressive Destructive
 Other: _____

Has your animal ever bitten anyone? Yes No

If yes, please describe what happened: _____

Has this animal been around children? Yes No Unsure

If yes, how does this animal behave around children? (check all that apply)

- Very loving Playful Calm Avoids children
 Nips or bites Enjoys being held Acts aggressively
 Other: _____

Has this animal been around or housed with other animals of the same species? Yes No Unsure

If yes, describe how this animal acts around animals of its own kind?

- Playful Avoids
 Acts aggressively There were no other animals in the home

Has this animal been around other animals of a different species? (dogs, cats, etc.) Yes No Unsure

If yes, what kind of animal? _____

Describe how this animal acts around other animals:

- Playful Avoids Indifferent
 Acts aggressively There were no other animals in the home

What would you describe to be the perfect home for this animal? _____

Tell us your favorite characteristic about this animal? _____

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