



CHAMPAIGN COUNTY HUMANESOCIETY

Small Animal Relinquishment Questionnaire

Please be thorough and honest in completing this form.

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:

Species and sub-species/breed of Pet: _____

Why are you surrendering your pet today? _____

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

Species and sub-species/breed: _____

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?

- | | | |
|--|--|---|
| <input type="checkbox"/> CCHS | <input type="checkbox"/> Shelter or Rescue | <input type="checkbox"/> Found as a stray |
| <input type="checkbox"/> Friend/relative | <input type="checkbox"/> Pet store | <input type="checkbox"/> Breeder |
| <input type="checkbox"/> Newspaper ad | <input type="checkbox"/> Born in my home | <input type="checkbox"/> Other _____ |

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

Medical History:

Has this animal ever been to a vet? Yes No Unsure

If yes, name of Veterinarian: _____ Date of last exam: _____

Are the Veterinary records in your name? Yes No

If no, whose name would they be under? _____

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 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? (check all that apply)

Commercial diet Timothy hay Alfalfa hay Fresh vegetables

Other: _____

Personality Profile:

Traits that describe your animal's personality: (check all that apply)

Energetic Friendly Tolerates handling Playful Independent Affectionate

Fearful Aggressive Destructive Shy Indifferent Avoidant

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)

Friendly Playful Calm Tolerated handling

Fearful Avoidant Indifferent Acts aggressively (please explain): _____

Other: _____

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

- Friendly Playful Calm Tolerated handling
 Fearful Avoidant Indifferent Acts aggressively (please explain): _____

Other: _____

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

- Friendly Playful Calm Tolerated handling
 Fearful Avoidant Indifferent Acts aggressively (please explain): _____

Other: _____

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

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 Avoidant Indifferent Fearful Acts aggressively There were no other animals in the home

Describe any unique personality traits or behaviors for this animal?

Please add additional information/comments that would be helpful to the CCHS staff: _____

