

## CANINE ADMISSION FORM

The information you provide helps us find the best possible placement for your dog.

Impound Number: A5772143 Date: 4/24/20  
 Dog's Name: Minnie Dog's Sex: F Is your dog spayed or neutered?  Yes  No  Unsure  
 Dog's Age: 7 Primary Breed: Terrier Secondary Breed: \_\_\_\_\_  
 Why are you turning in your dog? Agresive Behavior

How long have you had your dog?  less than 6 months  6 months to 1 year  1-5 year  More than 5 years

Where did you acquire your dog from?  Pet Store  Online  Took in as a stray  Shelter/Rescue: \_\_\_\_\_

Private Breeder: \_\_\_\_\_  Other: \_\_\_\_\_

Has your dog lived or been around any of the following animal? If yes, how did he/she react? (check all that apply)

Big dogs  Small dogs  Cats  Other: \_\_\_\_\_

How much time (%) dogs your dog spend Indoors:  Outdoors: \_\_\_\_\_

Is your dog housebroken?  Yes  No  Partially

Crate-trained?  Yes  No If yes, how many hours is your dog usually crated for? \_\_\_\_\_

When home alone, where is your dog kept and for how many hours? Crate

Please describe your yard:  Fully fenced Height: \_\_\_\_\_  Partially fenced  No fence  Tethered

Has your dog interacted with children?  Yes, lives with kids ages: \_\_\_\_\_  Visits with kids ages: \_\_\_\_\_  No

If your dog has been around children, how did he/she behave:  Playful  Tolerant  Avoids  Hides  No

Nervous but warms up  Chases  Growls  Lunges at  Snarls  Tries to bite

Is your dog good in the car?  Yes  No  Unknown

How is your dog on a leash/harness:  Walks politely  Pulls slightly  Pulls hard  Never been on a leash

Does your dog bark or lunge at anything when on a leash? If so, explain: Barks

Does your dog know any cues or tricks? only how to sit with treats

Does your dog try to escape?  Often  Sometimes  Never

If yes, which methods of escape does your dog use?  Digging  Jumping  Climbing  Door Dashing

Is your dog destructive?  Yes  No If yes, please describe: \_\_\_\_\_

What best describes your dog's energy level?  High energy  Medium energy  Low energy

How do you exercise your dog? running / walks

What is your dog's favorite activity? running

What is your dog's favorite toy? Ball

What kind of food do you feed your dog?  Wet  Dry  Both What brand(s): any

Has your dog ever bitten or tried to bite any of the following:

Adult  Child  Family Member  Mail or Delivery carrier  Stranger  Another dog/animal

Please provide as much detail as possible about any bites or attempts to bite, including what happened before, during, and after the incident. If there has been more than one incident, please describe the three most recent below:

while grooming her hair.

Please tell us your favorite thing about your dog:

loves getting pet. if she knows the person well.

Is there any additional information you would like to share about your dog:

Can the new owner contact you for more information about your dog?  Yes  No If yes, please provide a phone

number or email address at which you can be contacted \_\_\_\_\_