

Dog surrender form

We know the decision to give a pet to the shelter is never easy. One of the best things you can do for your dog is give us as much detail as possible on this form so we can find the best possible match for its new forever home.

Shelter's use only

Surrender date: _____

Animal number: _____

Uploaded by: _____

Animal information

Dog's name: _____ ☐ Male ☐ Female

☐ Spayed/Neutered ☐ I don't know

Age (a guess is OK): _____

How long did you have the dog? _____

Where did you get your dog? _____

Giving up the dog

Why are you giving your dog to the shelter? _____

Why did you choose our shelter? _____

Is there anything we could do to help the pet stay in your home (i.e., training, food, low-cost care)?

Would it be OK for the new owner to contact you with questions? ☐ Yes ☐ No

If yes, what is the best way for them to contact you?

Phone

Email

Your dog's living situation

My dog is: ☐ Sleeps indoors ☐ Strictly outdoors ☐ Indoor/outdoor

☐ Housetrained

☐ Occasionally has accidents in the house

☐ Outdoor only

Comments: _____

My dog has shared a house with:

☐ Dogs

☐ Kids 11-18

☐ Cats

☐ Adults

☐ Caged birds

☐ Other: _____

☐ Kids 0-10

My dog eats: ☐ Canned (wet) food ☐ Dry food ☐ Other ☐ Has a special diet

Comments: _____

Your dog's behavior and personality

Dog's favorite toys? _____

Has this dog ever shown aggression to people? ☐ Yes ☐ No

If yes, explain: _____

Has this dog ever shown aggression to other animals? ☐ Yes ☐ No

If yes, explain: _____

Has the dog been seen by a (behavior) trainer or taken an obedience class?

If yes, explain: _____

Name of trainer/facility: _____

The dog knows these commands:

☐ Sit

☐ Down

☐ Stay

☐ Shake

☐ Leave it/drop it

☐ Other: _____

Please check as many of the following boxes that describe your dog's behavior and habits:

☐ Barks for attention

☐ Rides well in cars

☐ Fights with dogs

☐ Walks on a leash

☐ Reserved

☐ Independent

☐ Likes water

☐ Friendly with kids

☐ Likes the mailperson

☐ Likes being held

☐ Outgoing/friendly

☐ Calm

☐ Crate trained

☐ Sleeps on the furniture

☐ Lap dog

☐ Likes being groomed

☐ Chases cats

☐ Playful

☐ Shy with strangers

☐ Has been to agility class

☐ Chews playfully

☐ Anxious/nervous

☐ Pees in the house

☐ Dislikes children

☐ Very active/high energy

☐ Likes to play fetch

☐ Grabs/tugs/jumps on people when excited

☐ Protects home/owner

☐ Guards toys/treats

☐ Other: _____

Your dog's medical information

Has your dog been vaccinated in the last year? ☐ Yes ☐ No

Do you have medical records for your dog? ☐ Yes ☐ No

When was the last time the dog went to the veterinarian? What veterinary clinic do you use?

Does your dog have any known medical issues? Do you have concerns about your dog's health?

Is there anything else we should know about your dog?
