



Humane Pennsylvania Intake Questionnaire

We know that the decision to surrender your pet is a difficult one. This questionnaire is a way for pet owners who must surrender their pet to communicate with potential adopters about their pet's personality. Included are the questions most frequently asked by our adopters. By taking a moment to answer the following, you can help ensure that your pet has the best chances of being placed into a loving, appropriately matched home. Please answer as many questions as you are able to, and provide as much information as possible.

Dog's name: _____ **Sex:** Male Female Spayed Neutered

Age: _____ **Breed:** _____ **How long have you had this dog?** _____

Is this dog microchipped? Yes No

Where did you get this dog from? This shelter Friend/relative Newspaper/Internet Found

Breeder Pet store Other shelter/rescue: *(Please provide name)* _____ Other: _____

Why are you surrendering this dog? _____

BEHAVIOR HISTORY

Has this dog ever:

Growled or showed teeth at a person: Yes No

Snapped at a person, but did not make contact with their skin: Yes No

Bitten and broken skin: Yes No

If you marked, "Yes," to any of the above questions, please indicate how long ago this occurred and describe the circumstances: _____

Has this dog ever:

Displayed aggressive behavior over food: Yes No

Displayed aggressive behavior over rawhides or bones: Yes No

Displayed aggressive behavior over toys: Yes No



If you marked, "Yes," to any of the above questions, please describe the circumstances below:

How does this dog react to strangers: Excited/loves everyone Shy but friendly Scared/hides
 Growls Barks Other: _____

Has this dog ever lived with children? Yes No If yes, list ages: _____

If no, has this dog interacted with children on a frequent basis? Yes No

How does this dog interact with children?

- Unknown; has never been around children
- Approaches children without hesitation
- Shies away from kids
- Barks and carries on when sees children
- Growls and acts aggressively towards children
- Repeatedly jumps up and is mouthy
- Other: _____

MEDICAL HISTORY

What veterinarian, if any, has this dog been seen by? _____

Has this dog been diagnosed with and/ or treated for any medical conditions or diseases?

Yes No If yes, please explain: _____

Does the dog have to be muzzled at the veterinarian? Yes No

INTERACTIONS WITH OTHER ANIMALS

What other animals did this dog live with?

No other animals in household Dogs Cats Other: _____

If this dog has lived with other dogs, please provide the following about the other dogs in the household: (Breed, sex, age)



How does this dog interact with other dogs in your home?

- Friendly and happy to have a buddy to hang out with
- Ignores; Could care less if another dog is around
- Aggressive; Actively tries to hurt the other dog
- Gets scared; Hides or cowers
- Is possessive of toys, people and/or areas
- Other: _____

How does this dog respond to other dogs that it does not live with?

- Positive, has interest in playing
- Barks and gets very excited
- Ignores; Could care less if another dog is around
- Aggressive; Actively tries to hurt the other dog
- Gets scared; Hides or cowers
- Other: _____

How does this dog respond to cats?

- Unknown; this dog has never been around a cat
- Sniffs and is curious but once cat is uncomfortable the dog backs off
- Intimidated and shies away from
- Chases
- Fixates on cat and is almost impossible to get away from
- Too rough!
- Barks and growls, actively tries to attack cat
- Other: _____

ROUTINES & HABITS

How often and when does this dog eat? _____

What brand of food does this dog eat? _____

What specific commands does this dog know (sit, stay, etc.)? _____

Do you crate this dog? Yes No

If yes, how does the dog respond to the crate?

- Goes right in when it is time
- Has to be coaxed in with treats
- Runs away and hides when it is time to go in the crate
- Goes in but barks and does not settle
- Other: _____



Is this dog housebroken? Yes No

If "No," how often does this dog have accidents? Daily Weekly Once in a while

Where does this dog sleep at night? _____

How long is this dog left alone each day? _____

When this dog is left alone, is he/she: Kept outdoors Free in home In a crate

Confined to a room Other: _____

Does this dog destroy things in the house when left alone? Yes No

PERSONALITY INFORMATION

Likes: _____

Dislikes: _____

Is the dog afraid of: Cars on street Children Men Loud noises Riding in cars

Vacuum cleaner Water Thunderstorms Other: _____

Does this dog enjoy being bathed? Yes No Groomed? Yes No

Describe this dog's activity level: Low Moderate High

Does this dog enjoy: Agility Car rides Digging Fetch Walks Water Quiet time

Running Playing with toys Other: _____

What is this dog's favorite toy or activity: _____

If you could choose this dog's new family, what would you say is the ideal home: _____

Is there anything else you would like this dog's next owner to know: _____