

Owner Surrender Intake Form (Dog)
OPERATION PETS ALIVE!

Please take the time to answer each of these questions to the best of your ability. We want to find your pet a good forever home as quickly as possible. ANY information is important! Please answer thoroughly and honestly so we might make a good match for him. Thank you Operation Pets Alive volunteers.

Owner Name _____
City, State, Zip _____
Email _____ Home Phone _____ Cell _____
Work _____

DESCRIPTION of DOG:

Name _____ Sex _____ Age _____
Breed if known: _____ Mother _____ Father _____
Color _____ Weight _____
AKC papers and/or pedigree if available _____

MEDICAL HISTORY:

List any known medical conditions _____
List any past surgeries or severe illnesses _____
List all current medications or supplements _____
Heartworm preventative? _____ Date last administered _____
Rabies Vaccine? _____ Date administered _____ Next one due? _____
DHLPP Vaccine _____ Date administered? _____
Bordatella? _____ Date administered? _____
Heartworm Test within last 60 days? _____ Positive _____ Negative _____
May we contact your vet for any additional information?
Veterinarian Name _____ Address _____
Phone? _____
When was your last visit to your vet and for what reason? _____

INFORMATION FOR NEW HOME

Does your pet live mostly indoors or outdoors or both? _____
Where does your pet sleep? _____ What type of bed? _____
What food has your pet been eating? _____ How often? _____
How much? _____
Housebroken? Completely? _____ Partially? _____ Not at all? _____
OK in a crate? _____ Walks well on a leash? _____ Travels well in a car? _____
Knows some commands? Sit? _____ Stay? _____ Down? _____ Come? _____ Any other command
or "tricks"? _____

BEHAVIORAL ATTRIBUTES

Energy level best described? Low_____ Moderate_____ High_____ Hyperactive_____
Loves everyone?_____ Sweet and Playful?_____ Calm?_____ Shy
and/or fearful of strangers?_____ Snappy?_____ Has shown aggression?___ If so,
explain_____ Digger?_____
“Escape Artist”?_____ Destructive? If yes, how_____
Barks or howls frequently?_____ Jumps up on people?_____

Please circle all behaviors that describe your pet: Friendly, Gentle, Noisy, Aggressive,
Obedient, shy, calm, stubborn, craves attention, anxious to please, affectionate
Please explain any negative behavior traits_____

Does your pet get along with children? _____ What ages : 1 to 5yrs_____ 5 to 10____ Not
Suited for children_____ Why_____
All ages_____ Cats_____ Other dogs_____ Strangers_____
What activities does your pet enjoy most? Swimming, fetching Frisbee, Walks
running loose in back yard or inside a fenced in dog park, “Tug of War” playing
with other dogs ? Other activities_____
Anything unique or special about your pet that you might want to tell us?_____

What is the main reason you want to find a new home for your
pet?_____

What do you consider an ideal home for your pet?

If you are having a behavior problem with your pet, would you consider
keeping your pet if we could help you with training or any other
inconvenience you feel your pet is causing in your home right now?_____

Signed-Current Owner of
Dog/Assignor_____ Date:_____

Signed-Co-owner (if applicable)_____ Date:_____