

Attachment A

Please fill out the entire form. Any areas left blank may delay the process.

Dog Information:

Dog's name: _____

Breed: _____

Sex _____

Birthday/Age: _____

Color: _____

Spayed/Neutered: _____

Is the dog microchipped? _____

How long have you had your dog and where did you get the dog?

If you got your dog from a breeder or another rescue, have you contacted them to take the dog back and what was their response? _____

Please explain why you need to surrender your dog. _____

Please share what are the best traits of your dog. _____

About Your Dog's History:

Is your dog housetrained? _____ How does the dog tell you it needs to go outside? _____

Is your dog crate-trained? _____

How long can your dog comfortably be left in a crate? _____

Describe how your dog's behavior when left alone. Mark all that apply and explain the behavior below.

Scratches

Barks

Whines

Soils in-house

Destructive

Pants/Drools

Paces

Self-harms

Where does the dog spend its time when you are away from home? On average how many hours can your dog comfortably be left alone? _____

What type of fencing do you have in your yard? Has your dog ever escaped? Describe. _____

What is your dog's daily routine(walks, fetch in yard, dog park, etc)? _____

How does your dog walk on a leash? Mark all that apply and describe them below.

Loose leash

Pulls

Easily distracted

Lunge at people

Lunge at cars

Lunges at wildlife

Growls at dogs

Growls at people

What equipment have you used for walking on a leash (flat collar, Prong collar, Halti, or harness)? _____

Has your dog had any formal training? If yes, can you provide the trainer's name and can we contact the trainer? _____

List commands, tricks, skills the dog knows:

Where does the dog spend the day? _____

Where does the dog sleep? _____

Does the dog ride well in vehicles? _____

Please list all the ages and genders of all humans in the household: _____

Are there other pets in the home? Please include breed, age, gender, spayed/neutered

About Your Dog's Behavior:

What is the dog's reaction to other dogs? Please describe how your dog behaves around known and unknown dogs in your home and when walking on leash.

Has your dog bitten another dog? If yes, please describe what happened and what was your response.

How does your dog behave around children in your home and away from the house? _____

Has your dog ever bitten or growled at a child? If yes, describe what happened and your response. _____

How does your dog behave when a stranger enters your home?

How does your dog greet strangers outside the house?

Has your dog ever bitten or growled at a stranger? If yes, describe what happened and what was your response. _____

How does your dog behave around cats and seeing other animals inside and outside the house?

Does your dog have any fears (such as thunder, fireworks, baths, going to the vet, riding in cars, nails trimmed, etc)? If yes, what is your dog's reaction and how do you comfort/manage the behavior?

Does your dog have any undesirable habits or behavior problems (excessive barking, digging, chewing, jumping on people, marking in the house, escaping, etc.)? _____

About Your Dog's Medical History:

Physical problems or conditions, including allergies: _____

Medications, currently or previously: _____

Veterinarian's name, address and phone: _____

By your signature below, you authorize Rocky Mountain Lab Rescue to contact your vet and receive access to this dog's records and other information about this dog.

Date of most recent shots: Distemper/Parvo _____

Rabies _____ Bordetella _____

Other _____

Last heartworm test: _____

Type of heartworm preventative: _____

Date last administered: _____

Any major injuries, illness or surgeries sustained by the dog?

Final Thoughts:

Describe the ideal home for the dog: _____

What are your dog's favorite toys/games? How does your dog prefer to spend time? _____

Feeding schedule and brand of food: _____

Are there any other things you think foster families or adoptive families should know about this dog? _____

Would you have any concerns placing your dog in a foster home with any of the following. Circle all that apply.

| | | | | |
|----------|------------|------------|-----------|------------------|
| Kids <5y | Kids 6-10y | Kids 11-16 | Male dogs | Female dogs |
| Big dogs | Small dogs | Cats | Apartment | Being left alone |

Signature: _____

Date: _____