



BASIC INFORMATION	Today's Date:		
Pet's Name:	Any Nicknames: How long have you had this pet: Is your pet altered/fixed?		
Pet's Current Age:			
Is your pet?			
Why are you giving up your pet:	other pets (list): es: her:		
How did you obtain this pet: □ Friend, neighbor, or family □ Born at home □ Stray □ Gift □ Adopted from (member		
Why did you get this pet: □ Companion for: □ Myself □ □ Family member got the pet □ Unwanted gift □			
Was this pet raised with kids: \Box No \Box Yes, ages: \Box 0-2	□ 3-5 □ 6-9 □ 10-12 □ 13-15 □ 16+ How many:		
Has this pet spent time around: Cats: □ Yes No Reaction: □ Friendly Dogs: □ Yes □ No Reaction: □ Friendly Same Species: □ Yes □ No React Other: : □ Yes □ No React	y 🗆 Playful 🗆 Tolerant 🗖 Afraid ion: 🗆 Friendly 🔲 Playful 🔲 Tolerant 🔲 Afraid		
	utside only		
How was this pet confined: Wire bottom cage Flat	/plastic bottom cage □ Wire cage □ Plastic cage □ X-Pen □ Free roaming in home □ Other:		
Type of bedding: □ Newspaper □ Carefresh □ Wood s	shavings, type:		
How does your pet react when their cage is being cleaned:□ Seems annoyed and rearranges stuff□ Seems s□ Don't regularly clean cage / hutch□ Other:	cared and runs away Pet is removed for cleaning		
Is this pet litter box trained: \Box Never tried \Box No \Box	Yes, what type of litter:		
How often was this pet out of cage: \Box Daily \Box Wee	ekly \Box Once in a while \Box Never		
When out of cage, is this pet: \Box In a ball \Box Loose, who	le house DLoose, specific rooms:		
When is this pet most active?	httime 🛛 Both		
, , , , , , , , , , , , , , , , , , , ,	Balls Uwood and/or willow chews toys (ex. baby keys) Cardboard items and/or paper bags		

Doesn't play with toys	Never given toys	Other:

FEEDING INFORMATION

 What type of food does this pet eat: □ Pellets with seed mixed in □ Grass hay (ex. timothy or oat) □ Alfalfa hay □ Fruits/Veggies: 	 Alfalfa based pellets Whatever is at the store Other: 		
Does your pet get "treats" on a regular basis: Does your pet get "treats" on a regular basis:			
How does your pet drink water: UWater bottle Water bow	N		
GROOMING AND HANDLING INFORMATION			
Does your pet enjoy being pet: \Box Yes, will nudge for more \Box Yes	a □ No □ No, runs away		
Does this pet like to be: Dicked up-they initiate Dicked up-peop	ple initiate D Held-they initiate D Held-they	initiate	

What areas of your pet's body do they **NOT** like being touched/handled?

Are you able to clip the nails:
Never tried
No
Yes- by myself
Yes- with a helper

BEHAVIORAL INFORMATION

How does this pet behave with:

Family		Visitors to the Home			
Adults	9 - 17	Newborn - 8	Adults	9 - 17	Newborn - 8
□ Friendly	□ Friendly	□ Friendly	□ Friendly	□ Friendly	□ Friendly
Playful	Playful	Playful	Playful	Playful	Playful
Plays gently	Plays gently	Plays gently	Plays gently	Plays gently	Plays gently
Plays rough	Plays rough	Plays rough	Plays rough	Plays rough	Plays rough
Cuddly	Cuddly	Cuddly	Cuddly	Cuddly	Cuddly
Reserved	Reserved	Reserved	Reserved	Reserved	Reserved
□ Shy	□ Shy	□ Shy	□ Shy	□ Shy	□ Shy
Fearful	Fearful	☐ Fearful	☐ Fearful	□ Fearful	□ Fearful
□ Aggressive	□ Aggressive	□ Aggressive	□ Aggressive	□ Aggressive	□ Aggressive

What is your pet afraid of:_____

How does this pet react when afraid (hides/kicks/etc.): ______

What do you enjoy most about this pet:_____

Describe the ideal home you would like for this pet: _____

What would be the wrong home for this pet: _____

Please add any additional information that you feel would be helpful for us or a new owner to know about this pet:_____

What is this pet's medical history:

Who was the pet's veterinarian: _____ Phone: _____ Phone: _____

Please sign here so we can access this pet's vet records: _____

May the new owner(s) contact you for further information?

Optional:

PET NAME



a

MY PETTING PREFERENCE CHART

PET NAME



○ YES ○ HMM...OK ○ MAYBE ○ EH... ○ NO! MY PETTING PREFERENCE CHART

Pet name _____



