



SPCA Serving Erie County

Small Animal Surrender Profile

Date: _____ Shelter Animal ID# _____

Please take as much time as you need to fill out this form as accurately and honestly as possible. This information will help us match your small animal with his/her forever family. The more information you are able to provide, the quicker your small animal may be adopted. Any dishonest or false information can lead to the new owner returning the pet causing undo stress to the animal. Thank you.

PLEASE PRINT CLEARLY

GENERAL INFORMATION:

Type of companion animal:

Rabbit Guinea Pig Ferret Gerbil Rat Other: _____

Pet's Name: _____ Fur Color: _____

Breed: _____ Age: _____ Gender: Male Female

Is your animal spayed/neutered: Yes No

HISTORY:

1.) Why are you surrendering your pet? _____

2.) How long have you had this pet? _____

3.) Please list the ages and sex of the people this animal has lived with: _____

a. Is the animal comfortable around children? Yes No

Explain: _____

4.) Please tell us what other animals this pet has lived with and the numbers of them: _____

MEDICAL HISTORY:

1.) Has your pet been seen by a veterinarian in the last year? Yes No

What veterinary facility? _____

2.) Has the pet been diagnosed with and/or treated for any of the following issues (check all that apply)

Respiratory problems Skin/Coat issues Eye problems Ear problems

Dental problems Broken bones Other: _____

Surgery (explain) _____

BEHAVIOR/PERSONALITY

- 1.) **Check any behavior problems that apply:** Nipping Biting Kicking Scratching
 Urine spraying Chewing Digging Escape artist Aggression Cage territorial
- 2.) **Does your pet drink from a:** water bottle water bowl both
- 3.) **Size of cage (suggested the pet come with their cage)**_____
- 4.) **Is pets cage covered at night**_____
- 5.) **Does pet like to take baths or be sprayed**_____
- 6.) **Did your small animal regularly spend time out of his/her cage?:** Yes No
 - a. **If yes, how often?** Several hours a day Several times a week
 An hour or less a day Rarely or never
- 7.) **How often do you handle or physically interact with this animals?**_____
- 8.) **How is the animal's temperament?** Friendly Shy Independent Fearful
Explain:_____
- 9.) **If the animal is a ferret or rabbit, is it litter box trained?** Yes No N/A
 - a. **If yes, how often is the litter box changed?**_____
- 10.) **How often is the cage cleaned?**_____ **Was there aggression while cleaning?** Yes No
- 11.) **Does the animal play with toys?** Yes No **If yes, what kind?**_____
- 12.) **Likes**_____
- 13.) **Dislikes**_____
- 14.) **Vocabulary(Birds)**_____

DIETARY

- 1.) **What does your pet's diet consist of?** Check all that apply:
 Pellets Hay Veggies Fruits Other:_____
- 2.) **Product name**_____
- 3.) **What are your pet's favorite foods?**_____

Please list any other information you think is important to the adoption and care of your small pet:
