



OFFICE USE ONLY
Animal ID#: _____
Arrival Date: _____
Staff Name: _____

Feline Surrender Profile

Cats can't talk, so they can't tell us where or with whom they would like to live. To ensure that their home is a safe, happy and an appropriate place to live, we need you to fill out this form in as much detail as possible. Detailed and honest information from you is crucial to our placement process, so please take the time to fill out this profile with care and accuracy.

*Undesirable behaviors and medical issues do not necessarily create problems in placement, however, not disclosing those problems definitely does. **Dishonest or incomplete responses can undermine the safety and happiness of both your cat and his/her new owners. If there are questions that are unclear or you feel uncomfortable responding to for any reason, please speak to a staff member and they can provide you with assistance.***

Bite History

Has your cat bitten anyone or any animal in the last ten days? Yes No

Has your cat ever bitten anyone or another animal and drawn blood? Yes No

If you've checked yes to either question, please stop and inform a staff member.

General

Cat's name: _____ Cat's age (give DOB if known) or approx age: _____

Cat's fur color: _____ Cat's gender: Male Female Unsure

Spay or neuter: Spayed Neutered Unsure Not fixed

Declawed: Front Back None Unsure

Identification: Microchip None Tattoo (if tattooed, where?) _____

History

Why are you surrendering your cat? _____

If surrender reason is health or behavioral, please explain: _____

How long have you owned your cat? _____ Including yours, how many homes has your cat had? _____

Where did you acquire your cat?

- | | |
|---|--|
| <input type="checkbox"/> From BHS | <input type="checkbox"/> Pet Store |
| <input type="checkbox"/> Found as a stray | <input type="checkbox"/> Breeder |
| <input type="checkbox"/> Friend | <input type="checkbox"/> Another Shelter, if so, what shelter? _____ |
| <input type="checkbox"/> Relative | <input type="checkbox"/> A rescue group, if so, what rescue group? _____ |

- Born in my home Other (please explain) _____

Lifestyle

Please check all the animals that your cat has lived with. (check all that apply)

- Male Dogs Female Dogs Male Cats Female Cats
 Other (please explain) _____

Please describe your cat's behavior around other cats. (check all that apply)

- Never been around cats Adores other cats Friendly/playful Fights with injury
 Frightened Ignores Roughhouses Fights without injury

Notes: _____

Describe your cat's play style with other cats. (check all that apply)

- Plays gently Grooms Peacefully coexists Ignored each other
 Plays rough Wrestles with injury Wrestles without injury
 Other (please explain) _____

Would you recommend placing your cat in a home with other cats? Yes No

If no, please explain: _____

Please describe your cat's behavior around dogs. (check all that apply)

- Never been around dogs Respectful Friendly/playful Fights with injury
 Fights without injury Frightened Peacefully coexists Chases to harm
 Chases for fun Other (please explain) _____

Notes: _____

Would you recommend placing your cat in a home with dogs? Yes No

If no, please explain: _____

Where was your cat allowed to be? (check all that apply)

- Indoors only Indoors/outdoors Outdoors only
 Other (please explain) _____

Manners & Training

Is your cat litterbox trained? Yes No Accidents happen occasionally

If no or he/she has accidents, please explain: _____

If no or he/she has accidents, has he /she been to the vet to rule out an underlying health issue? Yes No

What type of litter does your cat use? (check all that apply)

- Scented Unscented Clumping Clay
 Wood pellets Other (please explain) _____

Where in the house was the litter box kept? (please explain) _____

Does your cat scratch furniture? No Yes
Is there a scratching post provided? No Yes (please describe) _____

Are there any special traits or habits that your cat has? _____

Health

Did your cat see a vet on a regular basis (at least once a year)? Yes No Unsure
If yes, which Veterinary Hospital? _____

Has your cat ever been hit by a car or required surgery? Yes No
If yes, please explain: _____

Has your cat ever been diagnosed or treated for any of the following by a vet? (check all that apply)

Heartworm disease Lyme disease Heart murmur Tumors
 Epilepsy/seizures Skin disorders Thyroid disease Arthritis
 FeLV Diabetes Chronic ear infections Urinary Tract Infection
 Upper Respiratory Infection Other (please explain) _____

If you checked any of the above, please explain the current status of your cat's condition (treatment completed, awaiting treatment, treatment ongoing, etc.) _____

Does your cat require medication? No Yes (please explain) _____

Are there any places on your cat's body he/she does not like to being touched, brushed or petted?
 No Yes (please explain): _____

Diet, Play & Experience With People

What brand of cat food does your cat eat? _____
What style of food? Wet food Dry food Combination of both

How often did you feed your cat and how much? _____

Did your cat receive treats on a regular basis? Yes No

If yes, what type of treats does your cat like best? _____

Does your cat have allergies to any grain or common food ingredients? Yes No

If yes, please explain: _____

What are your cat's favorite kinds of toys? *(check all that apply)*

- Toys with feathers
- Laser pointers
- Balls with bells
- Foil balls
- Scratching post
- Catnip toys
- Toys that crackle
- Toys that make noise
- Toy mice
- Plush toys
- No interest in toys
- Other *(please explain)* _____

Did your cat live with children? Yes No

If yes, what were the ages of the children? _____

Would you recommend your cat live with children? Yes No

Describe why or why not: _____

Describe your cat's behavior around children. *(check all that apply)*

- Friendly/playful
- Gentle
- Avoids children
- Nervous/frightened
- Indifferent
- Adores children
- Reacts with scatching
- Reacts with biting
- Other *(please explain)*: _____

Describe your children's behavior around the cat. *(check all that apply)*

- Respectful
- Active
- Ignores cat
- Loving
- Gentle
- Plays rough
- Nervous/frightened
- Loud
- Other *(please explain)*: _____

Additional Comments

Is there anything you would like to add about your cat that would be helpful to families considering adopting him or her? If so please explain in detail: _____
