



Naperville Area Humane Society

*A better home. A better life. A better future.*

## **Incoming Canine Personality Profile**

The following questionnaire provides us with information about how your dog behaved in many different circumstances while he/she was living with you. Because your dog is likely to behave in similar ways in a new home, this information will help us to find the most suitable home for your dog and to effectively counsel the new family. Your open and honest answers are necessary and appreciated so that we can process careful and successful adoptions.

By signing below, I certify that the information I am about to provide is accurate and truthful to the best of my knowledge.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Dog's Name: \_\_\_\_\_

Date: \_\_\_\_\_



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## Incoming Canine Personality Profile

Date: \_\_\_\_\_

### Dog and Household Information

1. Dog's name \_\_\_\_\_ 2. Gender  Male  Female 3. Age \_\_\_\_\_

4. Breed \_\_\_\_\_ 5. How long have you had this dog? \_\_\_\_\_

6. Is the dog spayed/neutered?  Yes  No

7. Where did you get this dog?

This shelter  Friend/relative  Newspaper/website  Found stray  Breeder  Pet store

Other shelter/rescue (which one) \_\_\_\_\_

Other (please describe) \_\_\_\_\_

8. Why are you surrendering this dog? \_\_\_\_\_

9. Including yourself, how many people of the following ages live in your house?

Age Range (years)	Female	Male
0-3		
4-9		
10-17		
18-29		
30-59		
60 +		

10. What other animals has this dog lived with?

No other animals in the household  Dogs, male  Dogs, female  Cats

Other \_\_\_\_\_

*continued*

**Typical Behavior** (your dog's **usual** behavior)

**11. How does your dog usually behave toward the following?** (check all that apply)

	Never Encounter	Friendly	Afraid	Shows teeth/growls	Snaps	Bites	None of these
People your dog knows							
Men							
Women							
Children							
Unfamiliar people							
Men							
Women							
Children							
Animals your dog knows							
Dogs							
Cats							
Unfamiliar animals							
Dogs							
Cats							

**12. Does your dog usually uncontrollably chase or attempt to chase any of the following?**

- Joggers  
  Bicycles  
  Skateboarders/rollerbladers  
  Cars/motorcycles  
  Outdoor cats  
 Squirrels or other small animals  
 Birds  
 Doesn't chase  
 Other (please describe) \_\_\_\_\_

**13. How does your dog usually react when you or another family member does the following to him/her?** (check all that apply)

	Never tried	Enjoys	Allows	Afraid	Shows teeth/growls	Snaps	Bites	None of these
Pick up/carry								
Brush								
Bathe								
Wipe feet								
Trim nails								

**14. How does your dog usually react when an unfamiliar person approaches or enters the yard or house?** (check all that apply)

- Friendly  
  Afraid  
  Barks  
  Shows teeth/growls  
  Snaps  
  Bites  
  None of these

*continued*

**15. Do you take your dog out to go to the bathroom?**

- Yes (please specify # of times/day) \_\_\_\_\_  No/paper trained

**16. Does your dog signal when needing to go outside?**

- Yes  No

If Yes, how? \_\_\_\_\_

**17. Does your dog usually have house training accidents?**

- Yes (please specify # of times/day) \_\_\_\_\_  No

**18. Where does your dog spend most of his/her time?**

- Inside the house, runs free  Inside the house, in cage  Outside the house, runs free in neighborhood  
 Outside the house, runs free in yard  Outside the house, in cage  Outside the house, tied  
 Other (please explain) \_\_\_\_\_

**19. How long is your dog left home alone, without people, during the day?**

- Never  1-3 hours  4-8 hours  9-12 hours  Over 12 hours

**20. When your dog is left alone, he/she is:**

- Outside  Free in home  Confined to a room  In a cage  Other \_\_\_\_\_

**21. When left alone, does your dog usually show any of the following behaviors? (check all that apply)**

- Destroy household items  Urinate/defecate  Bark/howl  Cry  None of these

**22. When you are home, does your dog usually show any of the following behaviors? (check all that apply)**

- Destroy household items  Urinate/defecate  Bark/howl  Cry  None of these

**23. When your dog plays does he/she typically: (check all that apply)**

- Jumps  Growls  Barks  Bites lightly  Bites hard  None of these

**24. What toys does your dog like? (check all that apply)**

- Balls  Frisbee  Plush  Squeaky  Tug toy  None  Other \_\_\_\_\_

**25. What games/activities does your dog like? (check all that apply)**

- Fetch  Tug  Chase  Wrestling  Long walks  Running  Swimming  None  
 Other \_\_\_\_\_

**26. Is your dog scared of ... (check all that apply)**

- Thunder  Fireworks  Vacuum cleaner  Men  Brooms  Large trucks  Hands  Water  
 Other \_\_\_\_\_

**27. Please tell us about your dog's "bad habits" \_\_\_\_\_**

**28. Is your dog allowed on furniture?  Yes  No**

**29. Where does your dog usually sleep overnight?**

- Cage  Floor  Dog bed  Couch  Owner's bed  Outside  Other \_\_\_\_\_

*continued*

**30. What commands does your dog know?**

- Sit    Down (lie down)    Stay    Come    Shake (give paw)    Heel    Off    Leave it  
 Other \_\_\_\_\_

**31. Does your dog respond to his/her name?**    Yes    No

**32. Has your dog attended any obedience training classes?**    Yes    No

**33. How well does your dog walk on leash?**

- Well, walks with a loose leash    Pulls slightly    Pulls hard    I don't walk my dog on a leash

**34. If your dog is walked on a leash, is the leash attached to a:**

- Collar    Harness    Gentle leader/head halter

**35. Does your dog have problems riding in the car?**

- Yes (describe) \_\_\_\_\_  
 No

**36. Has your dog escaped from your property two or more times in the last six months?**

- Yes (describe) \_\_\_\_\_  
 No

**Aggressive Behavior** (*behavior that has **ever** happened*)

**37. Do you think this dog is protective of you or anyone in your family? (Example: does he/she growl, snap, bite or stand in front of you when anyone approaches you?)**

- Yes    No    Don't know

If Yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**38. Is there any report of your dog ever inflicting a serious bite to a person (such as an attack or a bite requiring hospitalization)?**

- Yes    No    Don't know

**39. Has your dog ever attacked another dog resulting in severe injury or death to the other dog?**

- Yes    No    Don't know

**40. Has your dog ever attacked another domesticated animal species (cats or livestock, but not small pets such as hamsters, guinea pigs, etc.) resulting in severe injury or death to the other animal?**

- Yes    No    Don't know

*continued*

**41. Please check the appropriate box(es) if your dog has ever shown any of the following aggressive behaviors toward men, women, children, dog, or other domesticated animal species (cats or livestock, not small pets such as hamsters, guinea pigs, etc.). Do not include aggressive behaviors directed toward a veterinarian or groomer.**

	Shows teeth/ growls	Snaps	Bites	None of these	Do not know
Men					
Women					
Children					
Dog					
Cat					

**42. If a snap or bite to men or women was checked, did the snap or bite to the adult take place while breaking up a dogfight or while the dog was in severe pain?**  Yes  No

**43. If a snap or bite to childre was checked, did the snap or bite to a child take place while breaking up a dogfight or while the dog was in severe pain?**  Yes  No

**Was the child unsupervised?**  Yes  No

**44. Please explain the circumstances of the snap or bite. If you checked more than one bite in Question 40, please explain the circumstances of every instance.**

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**45. If any aggressive behavior was checked in Question 40, please answer the following questions. If this does not apply, skip to #45.**

Was the aggressive behavior:	Men		Women		Children	
	Yes	No	Yes	No	Yes	No
over dog food in the bowl?						
over human food?						
over bones, rawhides, or chews?						
over toys?						
stolen household objects?						
when the dog was disturbed while sleeping or resting?						
when an adult or child handled the dog (brushing, handling feet, bathing, teeth brushing, ear cleaning? (Do not include reactions to vet or groomer.)						
when an adult or child entered the house or yard?						
when an adult or child approached or reached toward dog?						

## Medical History

46. Is your dog up to date on vaccinations?  Yes  No

47. Please specify the name of the veterinary clinic/hospital where you take your dog:

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48. Has your dog ever shown any of the following aggressive behaviors when handled by a veterinarian or groomer? (check all that apply)

	Never had this done	Shows teeth/growls	Snaps	Bites	None of these	Do not know
Examine (including heart, teeth, and ears)						
Restrain						
Administer vaccinations						
Trim nails						
Draw blood						

49. Does your dog have to be muzzled at the veterinarian?  Yes  No

50. Does your dog have any past or present medical conditions?

Yes (describe) \_\_\_\_\_

No

51. Is your dog currently on medication or a special diet?

Yes (describe) \_\_\_\_\_

No

52. What type and brand of food does your dog eat? (check all that apply)

Dry  Wet/canned  Table scraps

What brand(s) \_\_\_\_\_

53. What time of day is your dog fed?  a.m.  p.m.  Both a.m. and p.m.

Please feel free to provide any additional helpful comments/information:

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