Humane Society Silicon Valley offers pet surrender services as space and resources allow. Our primary role in the community is to save the lives of animals at risk in local municipal shelters; therefore, we ask that you only consider surrendering your pet to our shelter as a last resort. If you feel you have exhausted all other options, please complete this form as thoroughly as possible and send it back to us via the contact information on the last page.

Thank you for your consideration!

**Next Steps: Reservations and Proof of Current Vaccinations are Required** Once we receive the completed questionnaire and proof of vaccinations (Rabies, DA2PP & Bordatella), we will contact you within 48 hours to review the information and discuss your options and next steps. Please do not bring your pet to the shelter without an appointment, as drop-in’s will not be accommodated.

### YOUR CONTACT INFORMATION

<table>
<thead>
<tr>
<th>Your Name:</th>
<th>Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td>E-mail:</td>
<td>Alt phone:</td>
</tr>
<tr>
<td>Address:</td>
<td>City and Zip:</td>
</tr>
</tbody>
</table>

### DESCRIPTION OF YOUR DOG and BASIC HISTORY

- **Dog’s Name:**
- **Age:**
- **Sex:** □ Male □ Female
- **Spayed/Neutered?:** □ Yes □ No

Breed and Color: ____________________________________________

Is your dog microchipped? □ No □ Yes

Chip #: _________________________________________________

Why do you need to give up your dog? _________________________________________________

If you have a time limit, please tell us the date you need to surrender by: __________________________

If we could help you resolve the issue, would you consider keeping your dog? □ Yes □ No □ Maybe

Relinquishing your pet to an animal shelter should be a last resort, what have you already done to try and find your dog a new home? ____________________________________________

Does your dog have a tendency to bite or snap? □ Yes □ No

If yes, does it break skin? □ Yes □ No

If yes, under what circumstances will your dog bite?

Has your dog bitten anyone in the last 10 days? □ Yes □ No

If yes, did it break skin? □ Yes □ No

If yes, what were the circumstances:

How long have you owned your dog? ____________________________________________

If this is not your dog, who owns this dog?

Including yours, how many homes has this dog had? ____________________________________________

Where did you get your dog from?

- □ Breeder
- □ Pet Store
- □ Born at home
- □ Friend or Relative
- □ Advertisement
- □ HSSV (when did you adopt?):
- □ Another Shelter / Rescue (which one?):
- □ Other: __________________________
FAMILY ENVIRONMENT

Please describe the human family members that your dog has lived with (check all that apply):

☐ Adult Men  ☐ Adult Women  ☐ Senior Citizens  ☐ Children (what ages):

Did your home have children as visitors on a regular basis?  ☐ Yes  ☐ No

If yes, what were the ages of the children:

Describe your dog’s behavior around children (check all that apply):

☐ Gentle  ☐ Friendly/playful  ☐ Nervous / frightened  ☐ Unpredictable
☐ Ignores or indifferent  ☐ Roughhouses  ☐ Too rough for children  ☐ Snappy at times
☐ Watches over children  ☐ Too active  ☐ Actively avoids children  ☐ Never been around children
☐ Other (please explain):

Would you recommend placing this dog in a home with children?  ☐ Yes  ☐ No

If no, please explain:

Please check all the animals that your dog has lived with (check all that apply):

☐ Male dogs  ☐ Cats  ☐ Birds  ☐ Small Animals (what kind):
☐ Female dogs  ☐ Rabbits  ☐ Reptiles  ☐ Farm Animals (what kind):
☐ Other:

Describe your dog’s behavior around other dogs (check all that apply):

☐ Never been around other dogs  ☐ Frightened  ☐ Friendly/playful  ☐ Aggressive with all dogs
☐ Ignores or indifferent  ☐ Bossy  ☐ Adores other dogs  ☐ Aggressive with same sex dogs
☐ Good with some dogs  ☐ Roughhouses  ☐ Gentle / submissive  ☐ Aggressive when on leash
☐ Other (please explain):

Would you recommend placing this dog in a home with other dogs?  ☐ Yes  ☐ No

If no, please explain:

Describe your dog’s behavior around cats (check all that apply):

☐ Never been around cats  ☐ Respectful  ☐ Friendly/playful  ☐ Chases to harm
☐ Ignores or indifferent  ☐ Frightened  ☐ Gentle / submissive  ☐ Chases to catch
☐ Aggressive  ☐ Roughhouses  ☐ Chases for fun  ☐ Has killed a cat
☐ Other (please explain):

Would you recommend placing this dog in a home with cats?  ☐ Yes  ☐ No

If no, please explain:

HOME ENVIRONMENT & MANNERS

Where was your dog kept when no human members of your family were at home (check all that apply):

☐ Free run of home  ☐ Crated  ☐ Confined to one room in home
☐ In garage  ☐ In fenced yard  ☐ Tied outside on chain or runner
☐ Other (please explain):

Where does your dog sleep at night (check all that apply):

☐ Loose in the home  ☐ Confined to one room  ☐ On couch or chair
☐ In crate  ☐ In adult’s room  ☐ In child’s room
☐ In garage  ☐ On the person’s bed  ☐ On the dog’s bed
☐ Outside in kennel enclosure  ☐ Outside (not in a kennel enclosure)
☐ Other (please explain):
How many hours of a **typical** day is your dog kept outside (check one):  

- None, lives only indoors  
- 5-10 hours  
- Less than 1 hour  
- Only inside at night  
- 1-5 hours  
- Lived outdoors, never been inside  
- Other (please explain): 

How is your dog confined to your property when outside (check all that apply):  

- Fenced yard  
- Kennel or enclosure  
- Dog house  
- Electronic Pet Containment  
- Never left alone outside  
- Other (please explain): 

Have you ever kept your dog tied or chained in the yard?  

- No  
- Yes, ___________ hours per day  

Has your dog ever escaped?  

- No  
- Yes, how? __________________________  
  If yes, where did your dog go, and how long was he gone?  

Is your dog housetrained?  

- Yes, never eliminates inside the home  
- Yes, but occasionally urinates inside  
- No, regularly eliminates inside  
- Used to be housetrained, not now  
- Yes, but occasionally defecates inside  
- Dog was never inside the home  

If your dog does have housetraining accidents, they most often happen when (check all that apply):  

- When dog is not closely supervised  
- When dog is not kept on a schedule  
- When dog is overexcited  
- When dog greets people  
- When dog is sleeping  
- Only urinates submissively  

How have you dealt with housetraining problems (check all that apply):  

- Made dog feel guilty/acted “mad” at dog  
- Confined dog inside  
- Yelled at the dog  
- Kept dog outside  
- Spanked/Swatted dog  
- Rubbed nose in it  
- Other: Consulted vet or trainer  

Is your dog crate trained?  

- Yes  
- No  
- Tried, but dog didn’t like crate  
- Tried, but dog escaped crate  

If yes, how long does your dog spend in the crate each day?  

Can your dog be left alone in the home or yard for 8 hours a day without issues?  

- Yes  
- No  
- Never tried  

Is your dog destructive when left alone in your home or yard (If yes, check all that apply)?  

- Chews woodwork/walls  
- Chews furniture  
- Chews on windows/doors  
- Chews clothing/shoes  
- Chews/ea\t other inappropriate objects  
- Digs or destroys yard  
- Is not left alone inside the home  
- Other (please explain):  

When left alone at home, does your dog annoy the neighbors?  

- Yes  
- No  

Is your dog allowed to sit and/or sleep on human furniture?  

- Yes  
- No  

Does your dog raid the trash, “steal” unattended people food or get into other similar mischief?  

- Yes  
- No  

**OBEIDENCE, EXERCISE, PLAY and BEHAVIOR**  

What kind of training does your dog have?  

- Home Training  
- Puppy classes  
- Board and Train  
- Advanced Training (agility, flyball, etc.)  
- Obedience classes  
- No Training  

Where & when:  

- Obedience classes  
- No Training  

How often do you work with your dog on manners/training?  

- Daily  
- Weekly  
- Not since obedience class(es)  
- Rarely  
- Never
Please tell us about any fun or useful tricks you have taught your dog to do *(check all that apply)*:

| □ Basic obedience commands | □ Come when called | □ Play fetch |
| □ Walk on a loose leash | □ Greet visitors politely | □ Wait for food |
| □ Shake or similar cute trick | □ Take treats gently | □ Get on & off furniture when asked |
| □ Ride nicely in car | □ Other: |

What words does your dog understand?

| □ Sit | □ Down | □ Heel | □ Come | □ Drop |
| □ Leave it | □ Take it | □ Drop | □ Wait | □ Off | □ Doesn’t know commands |
| □ Other: |

What language does your dog best understand?  □ English  □ Spanish  □ Vietnamese  □ Other______________________

Can your dog be allowed off-leash and *come when called?*  □ Yes  □ No  □ Sometimes

Does your dog jump up on people when greeting them?  □ Yes  □ No  □ Sometimes

What type of exercise does your dog get on a regular basis *(check all that apply)*?

| □ Accompanies owner running / jogging | □ Dog walker | □ Fetch |
| □ Accompanies owner walking / hiking | □ Dog park | □ Not enough exercise for my dog’s needs |
| □ Plays with adults | □ Plays with kids | □ No exercise at all |
| □ Plays with other dogs | □ Doggie daycare | □ Other: |

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

| □ Tennis balls / rubber balls | □ Rope toys | □ Shoes |
| □ Plush / stuffed toys | □ Frisbee | □ Sticks |
| □ Squeaky toys | □ Children’s toys | □ Other: |

How does your dog like to play with *people* *(check all that apply)*?

| □ Plays gently | □ Enjoys tug of war | □ Enjoys wrestling |
| □ Prefers to fetch | □ Plays rough, but stops when told | □ Plays rough, doesn’t stop when told |
| □ Prefers to chase | □ Tends to herd and/or nip | □ Jumps and uses mouth in play |
| □ Plays respectfully | □ Plays very physically | □ No interest in playing with people |
| □ Other: |

How does your dog like to play with *other dogs* *(check all that apply)*?

| □ Plays chase with little body contact | □ Herds or nips others during play | □ Plays hard with lots of body contact |
| □ Adapts to other dogs play style | □ Shares toys and plays quietly | □ Will not share toys |
| □ Hangs out/gentle play with other dogs | □ Barks constantly | □ Has to be in charge during play |
| □ Will play with all dogs | □ Does not enjoy play with dogs | □ Has never played with other dogs |
| □ Other: |

Please describe your dog’s behavior in the car *(check all that apply)*:

| □ Calm | □ Nervous | □ Gets car sick |
| □ Protective of car | □ Destructive | □ Never rides in car |

Is your dog protective or possessive of any of the following *(check all that apply)*?

| □ Of food (toward people) | □ Of toys (toward people) | □ Of his/her body |
| □ Of food (only with other animals) | □ Of toys (only with other animals) | □ Of property; good guard dog |
| □ Of owner/family | □ Of bed, crate, or space | □ Dog is not protective/possessive |
| □ Other: |

Please select all of the following that frighten your dog *(check all that apply)*?

| □ Men | □ Women | □ Babies or Toddlers |
| □ Teenagers | □ School-aged children | □ Unpredictable Children |
| □ Strangers / visitors | □ People in uniform | □ Veterinarian or groomer |
| □ Erratic or sudden movement | □ Loud voices / yelling | □ Loud noises |
| □ Thunder / lightenig | □ Fireworks | □ Cars |
| □ Vacuum | □ Broom | □ Bicycles / skateboards |
| □ Other (please explain): |
Has your dog ever barked, growled, snapped at or bitten any of the following people or animals? (check all that apply)

<table>
<thead>
<tr>
<th>Category</th>
<th>Barked</th>
<th>Growled</th>
<th>Snapped</th>
<th>Bitten</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult family members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children family members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strangers at door</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>Visiting adults</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Visiting children</td>
<td></td>
<td></td>
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<tr>
<td>Vet or groomer</td>
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<tr>
<td>People near his/her sleeping area</td>
<td></td>
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<tr>
<td>People near his / her food or treats</td>
<td></td>
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<tr>
<td>Pedestrians</td>
<td></td>
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<tr>
<td>People in uniform</td>
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</tr>
<tr>
<td>Wildlife</td>
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<tr>
<td>Friends or neighbors pets</td>
<td></td>
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</tbody>
</table>

What does your dog do when it sees wild animals like squirrels, raccoons, opossums (check all that apply)?

- Ignores
- Tries to play with
- Stalks
- Watches intently and/or silently
- Kills
- Chases
- Never seen a wild animal

Other (please explain):

Does your dog ever run after cars, bikes, skateboarders, or pedestrians?  Yes  No

If yes, please explain:

**HEALTH, DIET and GROOMING**

Name and Phone # of your dog’s veterinarian: __________________________________________________________

Approximate date of last visit: _______________________    Reason for visit: ___________________________________

How does your dog react to seeing the veterinarian (check all that apply):

- Loves it
- Tolerates it
- Hates it
- Nervous
- Needs to be muzzled for the vet
- Has never seen the vet

Has your dog ever been hit by a car or required surgery?  Yes  No

If yes, please explain:

Has your dog ever been diagnosed or treated for any of the following by a veterinarian (check all that apply):

- Heartworm disease
- Parvovirus
- Heart murmur
- Epilepsy or seizures
- Allergies
- Thyroid disease
- Arthritis or hip dysplasia
- Diabetes
- Separation Anxiety
- Chronic ear/eye infections
- Tumors
- Cancer
- Broken bone(s)
- Mange or other skin problems
- None, my dog has always been healthy
- Other illness / condition:

Does your dog require any medication on a regular basis? __________________________________________________________

What brand of food does your dog eat?

- How often does your dog eat?  Once a day  Twice a day  Always available  Other: _________________________
- Does your dog eat:  Wet food only  Dry food only  Combination

Does your dog receive “treats” on a regular basis?  Yes  No

Is your dog fed scraps from the table or “people food?”  Yes  No

Does your dog have allergies or sensitivities to any grains or common food ingredients?  Yes  No

If yes, what happens to your dog?
Has your dog ever been professionally groomed or bathed?  □ Yes  □ No

If yes, how did your dog behave?

Does your dog allow you to bath him/her?  □ Yes  □ No  □ Never tried

Does your dog allow you to brush him/her?  □ Yes  □ No  □ Never tried

Does your dog allow you to clip his/her nails?  □ Yes  □ No  □ Never tried

Are there any places on your dog’s body that s/he does not like being touched, brushed or petted?  □ Yes  □ No

If yes, please explain?

Has your dog ever been kenneled/boarded at a:

□ Private Boarding Kennel  □ Veterinarian  □ Animal Shelter  □ Never been boarded

If yes, how did your dog react to being kenneled / boarded?

__________________________

OTHER

What makes your dog the happiest?

What upsets your dog the most?

What else should we know about your dog so we may find it the best home?

Thank you for taking the time to fill out this questionnaire; this information is key to helping us help you and your pet. Please send this completed form to:

HSSV Intake Department
e-mail (preferred): customer_care@hssv.org
Fax: (408)262-2131
Mail: 901 Ames Ave. Milpitas, CA 95035

Questions? Please contact (408)262-2133 x110