**Dog Surrender - Questionnaire**

Valley Animal Haven is a managed admissions animal rescue facility and 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 this animal was adopted from Valley Animal Haven, please contact the office immediately and complete the questionnaire. Do not attempt to re-home a Valley Animal Haven animal on your own.** Thank you for your consideration!

**Reservations for Evaluation and Proof of Current Vaccinations are REQUIRED**. Once we receive the completed questionnaire and proof of vaccinations (Rabies, DHPPv, Bordatella, etc.), we will contact you within 72 hours to review the information and discuss your options and next steps. If an animal is accepted into our facility, a Surrender Fee WILL apply. Please **DO NOT** bring your pet to the shelter without an appointment, as drop-in’s will not be accommodated.

**I. Contact Information**

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| --- | --- |
| Your Name: | Primary Phone: |
| E-Mail: | Alternative Phone: |
| Address: | City and Zip Code: |

**II. Description of your Dog & Basic History**

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| --- | --- | --- | --- | --- |
| Dog’s Name | | | Age | Gender  🞏 Male 🞏 Female |
| Breed and Color | | | | Spayed or Neutered?  🞏 Yes 🞏 No |
| Is your Dog microchipped?  🞏 Yes 🞏 No | | Microchip Number | | |
| Why do you need to surrender this dog? | | | | |
| If you have a time limit, when do you need to surrender by? | | | If we could help you resolve this issue, would you consider keeping your dog?  🞏 Yes 🞏 No | |
| 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 tend to bite or snap?  🞏 Yes 🞏 No | If yes, under what circumstances will the dog bite or snap? | | | |
| How long have you owned this dog? | | | Including yours, home many homes has this dog had? | |
| Where did you get your dog from?  🞏 Breeder 🞏 Friend or Relative 🞏 Valley Animal Haven  🞏 Pet Store 🞏 Advertisement 🞏 Another Shelter: Which one?  🞏 Born at Home 🞏 Found as stray \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  🞏 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |

**III. Family Environment**

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| 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? \_\_\_\_\_\_\_\_\_\_\_) | |
| Do you have children as visitors on a regular basis?  🞏 Yes 🞏 No | If Yes, What ages? |
| Describe your dog’s behavior around children: (*Check all that apply*)  🞏 Gentle 🞏 Friendly / Playful 🞏 Nervous / Frightened 🞏 Unpredictable  🞏 Ignores / Indifferent 🞏 Roughness 🞏 Too rough for children 🞏 Snappy at times  🞏 Watches over them 🞏 Too active 🞏 Actively avoids children 🞏 Never with Children  🞏 Other: (Please Explain) | |
| Would you recommend placing this dog in a home with children? 🞏 Yes 🞏 No (if no, 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: (Please Explain) | |
| 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 / Indifferent 🞏 Bossy 🞏 Adores other dogs 🞏 Aggressive with same sex dogs  🞏 Good with some dogs 🞏 Roughness 🞏 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, explain) | |
| Describe your dog’s behavior around cats: (*Check all that apply*)  🞏 Never been around cats 🞏 Respectful 🞏 Friendly / Playful 🞏 Chases to harm  🞏 Ignores / Indifferent 🞏 Frightened 🞏 Gentle / Submissive 🞏 Chases to catch  🞏 Aggressive 🞏 Roughness 🞏 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, explain) | |

**III. Home Environment & Manners**

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| 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 a room 🞏 In garage  🞏 In fenced yard 🞏 Tied outside on chain or runner 🞏 Other: |
| Where does your dog sleep at night? (*Check all that apply*)  🞏 Loose in the home 🞏 Confined to a 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 a kennel 🞏 Outside |
| How many hours of a **typical** day is your dog kept outside? (*Check One*)  🞏 None, lives only indoors 🞏 Less than one hour 🞏 1 – 5 hours 🞏 5 – 10 hours  🞏 Only inside at night 🞏 Lived outdoors 🞏 Other: |
| How is your dog confined to your property when outside? (*Check all that apply*)  🞏 Fenced Yard 🞏 Kennel or Enclosure 🞏 Dog house 🞏 Electronic containment  🞏 Never left alone outside 🞏 Other: |
| 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? |

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| If your dog house trained? 🞏 Yes 🞏 No |
| If your dog crate trained? 🞏 Yes 🞏 No 🞏 Tried, dog didn’t like crate 🞏 Tried, dog escaped  If yes, how many hours does your dog spend in the crate each day? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Can your dog be left alone in your home or yard for 8 hours a day without issues? 🞏 Yes 🞏 No 🞏 Never Tried  If no, why not? |
| Is your dog destructive when left alone in your home or yard (*If yes, check all that apply*)? 🞏 Yes 🞏 No  🞏 Chews woodwork / walls 🞏 Chews furniture 🞏 Chew / eats other inappropriate objects  🞏 Chews on windows / doors 🞏 Chews clothing / shoes 🞏 Digs or destroys yard  🞏 Other: |

**IV. Obedience, Exercise, Play & Behavior**

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| What kind of training does your dog have?  🞏 Home Training 🞏 Puppy Classes 🞏 Obedience Classes 🞏 Board & Train  🞏 Advanced Training 🞏 No Training |
| Does your dog understand commands? (*Check all that apply*)  🞏 Sit 🞏 Stay 🞏 Down 🞏 Heel 🞏 Come 🞏 Drop 🞏 Leave it 🞏 Take it  🞏 Wait 🞏 Off 🞏 Other:  🞏 Doesn’t know commands |
| What language does your dog understand best? 🞏 English 🞏 Spanish 🞏 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 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 (to other animals) 🞏 Of toys (to other animals) 🞏 Of property ; good guard dog  🞏 Of owner / family 🞏 Of bed, crate or space 🞏 Dog is not protective or possessive  🞏 Other: |
| Please select the following that frighten your dog: (*Check all that apply*)  🞏 Men 🞏 Women 🞏 Babies or Toddlers 🞏 Teenagers  🞏 Unpredictable Children 🞏 Strangers 🞏 People in Uniform 🞏 Veterinarian or Groomer  🞏 Erratic/sudden movement 🞏 Loud voices 🞏 Loud noises 🞏 Thunder 🞏 Cars  🞏 Vacuum 🞏 Broom 🞏 Bicycles & Skateboards 🞏 Other: |

**V. Health & Diet**

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| --- |
| 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 🞏 Allergies 🞏 Thyroid Disease 🞏 Arthritis or Hip Dysplasia  🞏 Diabetes 🞏 Cancer 🞏 Tumors 🞏 Separation Anxiety  🞏 Chronic eye/ear infections 🞏 Broken Bones 🞏 Mange or other skin problems  🞏 None, my dog has been healthy  🞏 Other: |
| Does your dog require any medication or a special diet on a regular basis? 🞏 Yes 🞏 No  If yes, please explain: |

**VI. Review and Certification**

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| By my signature below, I certify that I am the legal owner of this animal. I also certify that the information I have provided on and in connection with this form is true, accurate and complete to the best of my knowledge. I understand that any false statements or deliberate omissions on this document or any other documents that I submit to Valley Animal Haven may be grounds for disqualification for consideration of surrendering my animal to this organization.  I understand that submission of the Dog Owner’s Questionnaire is not a guarantee that Valley Animal Haven will be able to make the space needed for my dog. | |
| Signature of Owner | Date |

**VII. Next Steps**

Thank you for taking the time to complete this Questionnaire. This information is key to helping us help you and your pet. Please submit the following to Valley Animal Haven for review and consideration:

* Completed & Signed Dog Owner’s Questionnaire
* Any Medical and Vaccination Record
* Current Picture of the Animal

Submissions may be made by emailing us at [valleyanimalhaven@gmail.com](mailto:valleyanimalhaven@gmail.com) or by mail or in-person to:

Valley Animal Haven

990 E. D Street

Lemoore, CA 93245

**ATTN:** Intake Department

Please allow 72 hours for our Staff to review your request and determine how to help you and your pet. Please note that Valley Animal Haven will contact you regarding the next steps which may include a temperament evaluation or a home-visit. A surrender fee may apply.

Should you have any questions or concerns, please contact our office at (559) 997-3601.

Thank you for your cooperation!