Suki’s Canine Rescue Crew

Dog Assessment Form

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| **Name of Dog** |  |
| **Breed / Sex / Age** |  |
| **Neutered / Spayed** | **Yes No** |
| **Microchipped** | **Yes No** **Chip No:**  |
| **Vaccinated** | **Yes No** |
| **Date last time dog was De-Flea’d / Wormed** |  |
| **What is your reason for re-homing the dog?** |  |
| **Does the dog know any basic commands?*****(please list)*** | **Yes No** |
| **What is the dog fed on, and how many times daily?** |  |
| **Does the dog show aggression if approached whilst eating?** | **Yes No** |
| **Where does the dog sleep?** |  |
| **Is the dog house-trained?** | **Yes No** |
| **Is the dog crate-trained?** | **Yes No** |
| **How often is the dog exercised, and where?** |  |
| **Does the dog pull when on lead?** | **Yes No** |
| **How does the dog react to other dogs, both on-lead and off?** |  |
| **Is the dog allowed off-lead during exercise?** | **Yes No** |
| **Does the dog return when called?** | **Yes No** |
| **Can the dog be left alone?****If ‘yes’, for how long and is there any negative reaction, e.g. barking, chewing** | **Yes No** |
| **How does the dog react to children?** |  |
| **How does the dog react to loud noises/ fireworks?** |  |
| **How does the dog react to being physically touched/restrained?** |  |
| **Does the dog like to play with toys?****Any preferences of toy/games?*****(please list)*** | **Yes No** |
| **Is the dog possessive over toys?** | **Yes No** |
| **How does the dog react when approached by strangers?** |  |
| **How does the dog react when eye contact is made?** |  |
| **Does the dog travel well by car/vehicle?** | **Yes No Unknown** |
| **Does the dog have any existing health issues?****If ‘yes’, please advise details of the problem and any medication prescribed *(if applicable)How is the dog with the vets?*** | **Yes No** |
| **Does the dog have any specific ‘likes’?*****(please list)*** |  |
| **Does the dog have any specific ‘dislikes’? *(please list)*** |  |
| **What is the dog like around other animals ie Cats, rabbits. Caged birds?**  |  |

**Name of Owner:
Address of Owner**

**Contact Number
Date:**