



Personality Profile

Owner's Name: _____

Pet's Name: _____ D.O.B.: _____

Breed: _____ Sex: _____

Primary Veterinarian: _____

Emergency Contact Number: _____

Agents allowed to drop-off/pick-up you pet: _____

History

Where did you get your dog? _____

If adopted, do you have any knowledge of your dog's past?

Is your dog around children? Does he/she like children?

Are there any other animals in your home? Please list

Does your dog get along with other pets in the home (if any)? _____

Health

How does your dog react to getting a nail trim? _____

Does your dog have allergies? _____ If yes, please list _____

Does your dog have any medical problems or physical limitations? _____

If yes, please explain _____

Does your dog receive flea/tick preventative? _____ What type? _____

Behavior

Which of these best describes your dog (circle all that may apply)?

Submissive Excited Dominant Shy Neutral

Is your dog afraid of any specific noises or occurrences? If so, please explain

How does your dog act to strangers coming into your home?

Does your dog have any specific phobias we should be aware of?

Are there any types of dogs that your dog seems to fear or dislike?

How does your dog react to puppies?

Does your dog like water activities? Swimming?

Has your dog ever:

Bitten anyone? _____ Under what circumstances? _____

Growled/snarled at anyone? _____ Under what circumstances?

Climbed or jumped over a fence? _____

Fought with another dog? _____ Under what circumstances?

Is your dog:

Mouthy? _____ A Jumper? _____ A Leash Puller? _____

A Barker? _____ A Digger? _____ Housetrained? _____

Is your dog protective of food, treats, or toys? If so, please explain

Has your dog ever played with other dogs? _____

Does your dog like to play with toys? Have a favorite toy? _____

Does your dog know any obedience commands? If so, which ones?

Are there any other comments about your pet that our Camp Pack Leaders would find helpful? _____
