

Owner Observations on Pet Weight

| Owner: Pet Name: | | _ |
|--|------------------------------|---|
| Dear Pet Owner, To help us serve you and your pet, please take a few minu | utes to answer the following | J |
| questions. | | |
| Thank You! | | |
| 1. I am aware of the health risks to my pet if he or she is overwe | ight. T F | |
| 2. I have been thinking my pet should lose weight. | T F | |
| 3. I wish I had more ideas about how to solve my pet's weight pr | roblem. T F | |
| 4. I have started working on my pet's weight, but would like some | e help. T F | |
| 5. I am concerned that my pet has a weight problem, but my fam | nily is not. T F | |
| 6. I may be part of my pet's weight problem because I can't resis | st giving treats. T F | |
| 7. I have tried everything to help my pet lose weight, but nothing | g works. T F | |
| 8. I think my pet's health would improve if he or she lost weight. | T F | |
| 9. I am willing to monitor my pet's food intake. | T F | |
| 10. I am willing to do whatever it takes to help my pet lose weight | . T F | |