

## Behavioral Questionnaire

Date: \_\_/\_\_/\_\_

Client's Name: \_\_\_\_\_ Dog's Name: \_\_\_\_\_ Breed: \_\_\_\_\_ Age: \_\_\_\_\_

Spayed/Neutered? (please circle) Y or N

If so, at what age? \_\_\_\_\_

What age was your dog when you acquired it? \_\_\_\_\_

Has your dog had previous owners? Y or N

How did you acquire your dog?

Rescue  Breeder  Friend/Family  Ad  Other: \_\_\_\_\_

Does your dog have any current medical conditions? Y or N

If yes, please list:

Is your dog currently on medication? Y or N

If yes, please list:

What brand of food does your dog eat? \_\_\_\_\_

Are there any other pets in the home? Y or N

Please list: Name, Species, Breed, Sex, Age

1)

2)

3)

4)

5)

Are any of these pets ill? (If so, please put a check next to that pet & note what type of illness)

Has your household changed in the last six months, ie; holiday, furniture, family members?

If yes, please specify (schedule change, baby, new pet, move):

1)

2)

3)

4)

5)

Please list family members living in home: Please include their Name, Relationship, Sex, Age Group.

1)

2)

3)

4)

5)

Where does your dog stay during the day?

Where does your dog sleep at night?

Does your dog have training experience? Y or N

If so, Who took/takes the dog to training?

Please check all that apply to your dog:

Puppy Class  Basic Obedience  Advanced/Agility  In Home  No Formal Training

Has your dog ever bitten a person? Y or N &/or Bitten another dog? Y or N

If yes to either question, please explain: \_\_\_\_\_

\_\_\_\_\_

Please circle the situation(s) that caused a need for behavior consultation:

- 1) Biting
- 2) Chewing
- 3) Barking
- 4) Jumping
- 5) Obedience i.e., Pulls on leash, Won't come when called, Housebreaking etc
- 6) Fearful/Skittish
- 7) Phobic Behavior i.e., Thunderstorms, Traveling, Veterinary Office, Grooming etc
- 8) Other: \_\_\_\_\_
- 9) Other: \_\_\_\_\_
- 10) Other: \_\_\_\_\_

Using the above list, please select the issues you would like to cover at the consultation, from Most importance, to Least Importance:

- 1)
- 2)
- 3)
- 4)
- 5)

It is very important for you to understand that consistency & the willingness to work with your pet are key to resolving the unwanted behavior. We practice "Positive Reinforcement Training" using several methods in which we have acquired through different trainers & behaviorists.

We may ask you to make a few minor changes in your life in order to help your pet adjust appropriately.

If at any time your pet's behavior worsens, please contact us immediately. If at any time you are uncomfortable or unwilling to go on with training your pet, please inform us of this as soon as possible.

Together, we can accomplish a calm & healthy relationship between you & your dog. We are here to help you, your family & your pet live a normal & happy life.