

Personality Profile

Print this form and fill out along with Application, Health Agreement, and Medical Form. **Please print.**

General Information

How long have you owned your dog? _____

Number of people in your household: Adults _____ Children _____

Does your dog like children? _____

Please describe how your dog behaves around children:

Do you have any other pets? _____

If yes, how does your dog get along with the other pets in your household?

Health and Grooming

Does your dog have hip dysplasia? _____

If yes, what restrictions need to be placed on your dog's activities or movements?

Does your dog have allergies? _____

Does your dog like to be brushed? _____

How does your dog react to his/her nails being clipped?

Does your dog have any sensitive areas on his/her body?

Where are your dog's favorite petting spots?

Behavior

How does your dog react to a stranger entering your home or yard?

Are there any kind of people your dog automatically fears or dislikes?

Are there any kind of dogs your dog automatically fears or dislikes?

How does your dog react to puppies?

What does your dog do to show he/she is happy?

How does your dog react to other dogs approaching it when you're out on a walk?

Has your dog ever growled at someone?

If yes, what were the circumstances?

Has your dog ever bitten someone?

If yes, what were the circumstances?

Has your dog ever climbed or jumped over a fence?

If yes, how high was it? _____

Is your dog frightened by any noises?

Has your dog ever growled or snapped at someone taking food or toys away?

What kind of games does your dog play with other dogs?

What kind of games does your dog play with people?

Has your dog ever had any formal obedience training?

What commands does your dog know?

Does your dog have a bathroom command?

Does your dog have a quiet command?

Other comments or information about your dog that you feel might be helpful:
