



FELINE PROFILE

To help your cat find a happy, permanent home, it is *extremely* important to be honest and detailed in providing the following information. Pet behavioral and medical issues can be easier for a new owner to manage when they are aware and prepared for them!

FIRST THING'S FIRST!

Has your cat bitten a person or animal, or been bitten in the last ten (10) days? Yes No

Did this cat come from another animal shelter or organization? Yes No

If yes, please provide the name of the organization: _____

General Information

Cat's Name and Nicknames: _____

Cat's Age or Approximate Age: _____

Cat's Sex: Male Female Unsure

Cat's Date of Birth (if known): _____

Is cat spayed/neutered? Yes No Unsure

Cat's Breed: _____

If yes, when was it done? _____

Cat's Color/Pattern _____

Is the cat declawed? No Front Only All 4

If declawed, when was it done? _____

Does your cat have a microchip?

Yes No Unsure

History

Why are you surrendering your cat? _____

How long have you been caring for your cat? _____

Where did you acquire this cat? _____

* If the cat was being given away, why? _____

Medical Information

Has the cat ever seen a veterinarian?

Yes No Unsure

If yes, is the cat current on vaccinations?

Yes No Unsure

Has this cat ever had surgery (other than spay/neuter)?

Yes No Unsure

If yes, please explain: _____

What vet clinics have seen this cat: _____

What person's name are the vet records under? _____

Has the cat been diagnosed with and/or treated for any illness? Yes No

If yes, please explain and provide dates of occurrence: _____

Has the cat exhibited any symptoms of illness or injury within the last month? Yes No

If yes, please explain: _____

Is the cat currently on any medications? Yes No

If yes, what medications and why? _____

Does the cat regularly receive flea/tick prevention? Yes No

If yes, what brand was used and when were they last given? _____

Has the cat ever had a negative reaction to any medication (including flea/tick prevention)? Yes No

If yes, what brand was it and what was the reaction? _____

Personality and Play Style

Which best describes your cat? Party Animal Cuddle Bug Ms./Mr. Independent Zzzzzz...

Comments: _____

What does your cat like to play with? _____

Lifestyle & Home Life

What areas did your cat have access to? Indoors Outdoors Both indoors and outdoors

Where did your cat spend most of his or her time (favorite places in home)? _____

Did your cat live with other animals in your home? Yes No

If yes, what other animals did your cat live with? _____

How did your cat interact with the other pets in the home? _____

How did your cat interact with visiting pets? _____

Describe this cat's exposure to children: Lived w/children Visited w/children Never w/children

How old are the children that interacted with this cat? _____

Have the experiences with the cat and child(ren) always been positive? Yes No Unsure

If no, please explain: _____

Is the cat more comfortable with (check all that apply):
 Women Men Kids
 Teenagers Seniors Loves all people

Please check any of the following behaviors your cat may have exhibited **toward people** for any reason (check all that apply):

- Growled Hissed Scratched Bit (did not break skin) Bit (broke skin)

What happened to cause this behavior? _____

Please check any of the following behaviors your cat may have exhibited **toward other animals** for any reason (check all that apply):

- Growled Hissed Scratched Bit (did not break skin) Bit (broke skin)

What happened to cause this behavior? _____

Dietary Habits

What type of food did the cat eat in your home? _____

Is your cat on any special diet? Yes No

If yes, what brand? _____ Reason? _____

Does your cat enjoy treats? Yes No Unsure

If yes, what kind? _____

How often is your cat fed? Food always available Scheduled mealtimes: _____

Litter Box Habits

We ask so many questions about litter box use because it is one of the main reasons cats are surrendered. Please help us by giving as much detailed information as possible. Sometimes a change in environment may be just what the cat needs, and sometimes there are more serious health or behavior issues involved.

Did your cat have access to a litter box in the house? Yes No

Where was the litter box located in the house? _____

If there are other cats in the home, how many shared a litter box? _____

How often was the litter box scooped? _____

What type(s) of litter was used? _____

How often did your cat use the litter box? Always (never had accidents) Regularly (few accidents)

Occasionally (frequent accidents) Rarely or never Went outdoors

If your cat had accidents, when did they begin/end? _____

If your cat had accidents, how often did it happen? _____

Please describe the type of litter box used in the home (covered, uncovered, electronic) _____

Please describe the accidents (where they occurred, urinating only, defecating only, etc...): _____

Can you pinpoint an event(s) that might have influenced/triggered inappropriate litter box use? No Yes

If yes, please explain _____

Please describe the measures you have taken to correct this problem: _____

Were you successful at correcting this issue? No Yes

Has your cat been to the veterinarian to rule out infection or underlying health issues? No Yes

If yes, what was the outcome? _____

Additional Comments

What are some things you truly love about this cat? _____

What quirks or habits are you not fond of in your cat? _____

How would you describe the ideal home for your cat? _____

Please add any other important information about your feline friend that would be helpful for his new owner:

Internal Use Only:

Animal ID number:	Intake Counselor:
Weight:	Date of Surrender:
Health or Behavior notes at time of arrival: _____ _____ _____ _____ _____ _____	
Items Received with cat: _____ _____ _____ _____	