Thank you for taking the time to fill out this background information sheet regarding your pet. The best picture of how your pet will be in a new home is how your pet behaved with you. Please answer all the questions honestly and completely. The VHS can find the best home for your animal with detailed, accurate information.

<table>
<thead>
<tr>
<th>INTRODUCTIONS</th>
<th>MY NAME and NICKNAME(S)</th>
<th>MY AGE</th>
<th>MY SEX</th>
<th>AM I SPAYED OR NEUTERED ALREADY?</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] FEMALE</td>
<td></td>
<td></td>
<td></td>
<td>[ ] YES Vet that altered me:</td>
</tr>
<tr>
<td>[ ] MALE</td>
<td></td>
<td></td>
<td></td>
<td>[ ] NO [ ] UNSURE</td>
</tr>
</tbody>
</table>

I lived in my home for ____________________________________________.

My family acquired me through the following way:

[ ] As a gift  [ ] Adopted from VHS  [ ] Friend
[ ] From a breeder  [ ] Adopted from Animal Control
[ ] From a pet store  [ ] Adopted from another shelter  [ ] Relative
[ ] Found as a stray  Shelter name: ________________________  [ ] Newspaper
[ ] Born at home

If I was acquired from someone in the third column above, my previous home couldn’t keep me anymore because ____________________________________________.

The following words could be used to describe my personality:

[ ] Cuddly  [ ] Opinionated  [ ] Cautious  [ ] Shy
[ ] Active  [ ] Playful  [ ] Inquisitive  [ ] Other
[ ] Easy-going  [ ] Mellow  [ ] Social

When being held/picked up, I react in the following ways:

[ ] I struggle a lot! I prefer petting instead of holding.  [ ] I struggle at first but quickly calm down and enjoy the attention.  [ ] I am calm. I love being held and spending time with people!
[ ] Try to get away  [ ] Kick  [ ] Nip/Bite  [ ] I break the skin when I bite.
[ ] Make unhappy noises  [ ] Thump my feet  [ ] I’ve bit and broke skin during the last 10 days.

The following scenarios could be used to describe my litter box training:

[ ] I’ve never had access to a litter box. I’m not sure how to use one.
[ ] I always use my litter box when I’m in my cage. I frequently and/or always forget to use my litter box when I’m out of my cage.
[ ] I’m still learning about litter boxes. I frequently poop when out to play but virtually all of my urine is contained in my cage/litter box.
[ ] I always use my litter box. When I’m out playing, I remember to return to my cage for pooping and urinating. I never have accidents.
### MY FAVORITE THINGS

<table>
<thead>
<tr>
<th>TOYS</th>
<th>TYPES OF ATTENTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Newspaper</td>
<td>[ ] Cheek rubs</td>
</tr>
<tr>
<td>[ ] Cardboard box</td>
<td>[ ] Ear rubs</td>
</tr>
<tr>
<td>[ ] Noisemakers</td>
<td>[ ] Hugs</td>
</tr>
<tr>
<td>[ ] Chew toys (wooden)</td>
<td>[ ] Eskimo kisses</td>
</tr>
<tr>
<td>[ ] Paper towel/toilet paper roll</td>
<td>[ ] Other</td>
</tr>
<tr>
<td></td>
<td>[ ] Belly rubs</td>
</tr>
</tbody>
</table>

#### TYPES OF ATTENTION

- [ ] Cheek rubs
- [ ] Ear rubs
- [ ] Hugs
- [ ] Eskimo kisses
- [ ] Other
- [ ] Belly rubs

### MY LIFE WITH CHILDREN

- [ ] I have not lived with children.
- [ ] I have lived with children of the following ages: ________________________________.

If I’ve lived with children, the following words describe my behavior with them:

- [ ] Friendly
- [ ] I enjoy being petted by kids, but I’m scared when they hold me.
- [ ] Afraid
- [ ] I prefer to play with older kids.
- [ ] Snappy
- [ ] I prefer a home without kids.
- [ ] Tolerant
- [ ] Other ________________________________

I am used to living

- [ ] Inside only
- [ ] Inside and outside
- [ ] Outside only

### MY LIFE WITH OTHER ANIMALS

- [ ] I have not lived with other animals.
- [ ] I have lived with the following types of animals:
  - [ ] Dogs
  - [ ] Rabbits
  - [ ] Hamsters/Gerbils
  - [ ] Cats
  - [ ] Ferrets
  - [ ] Guinea pigs
  - [ ] Birds
  - [ ] Reptiles
  - [ ] Other __________________
- [ ] I have not been allowed to play with these animals outside of my cage.
- [ ] I have been allowed to play with these animals, and I’ve reacted the following ways:
  - [ ] Playful
  - [ ] Aggressive
  - [ ] Other __________________
  - [ ] Afraid
  - [ ] Aloof

### MY PAST MEDICAL HISTORY

- [ ] I have no known medical problems.
- [ ] I have old injuries or health problems such as ________________________________.
- [ ] I need special medications such as ________________________________.
- [ ] I have not been to the vet in the past year.
- [ ] I have been to the vet in the past year. My doctor is ________________________________.
- [ ] My medical records are under ________________________________’s name.

### MY DIET

- [ ] I am used to eating at the following times:
  - [ ] AM _____
  - [ ] PM _____
  - [ ] Food left out at all times
  - [ ] Other
- [ ] My main diet consists of ________________________________.
- [ ] As treats, I get to eat ________________________________.

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My owner’s/guardian’s couldn’t keep me anymore because ________________________________________.

The perfect home for me would be ________________________________

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**THANK YOU FOR TAKING THE TIME TO LET ME TELL MY STORY!**