



Surrender of Standard Schnauzer to PVSSC

(Please Print)

Date: _____

Owner Information:

Name _____

Address _____

_____ Zip Code: _____

Phone _____ Alternate Phone #: _____

E-mail Address _____

Dog's Registered Name: _____

Sex: _____ Dog's Call Name: _____ A.K.C. #: _____

Date Whelped: _____ Color: _____ Markings: _____

Tattoo # _____ County License # _____ County: _____

Microchip Mfg. and Number: _____

Weight: _____ lbs.

Dog Referred By: _____ Date: _____

Dog's Owner of Record if different then above:

Name: _____

Address: _____

_____ Zip Code: _____

Phone # _____

Dog's Breeder of Record:

Name: _____

Address: _____

_____ Zip Code: _____

Phone # _____

A.K.C. Papers Available: Yes/No

Pedigree Available: Yes/No

Breeder Contract Available: Yes/No

Breeder Notified by Owner: Yes/No Response: _____

When Must Dog Be Removed From Current Home? _____

Why Is the Dog Available For Placement/Adoption? _____

Medical information:

Date of last vaccination for Rabies _____ Corona _____ DHLPP _____

Other (Bordatella, Lyme) _____

Has the dog been checked for the following: [If yes, dates last done and results]

Internal Parasites? _____

Heartworms? _____

External Parasites? _____

Hip Dysphasia? _____

Heart Disease? _____

Is there any significant medical history? _____

Is the dog spayed/neutered? Yes/No _____ If Yes give Date: _____

Past diseases? _____

Are there any allergies? _____

Medications? _____ Last Date Given: _____

Heartworm Preventative? _____ Last Date Given: _____

Flea/Tick Preventative? _____ Last Date Given: _____

Medical Records available on the dog to be given to PVSSC Rescue:

_____ Current Health Certificate

_____ Owner/Breeder willing to obtain Health Certificate

_____ Historical Only

Is the dog sufficiently sound physically, to function within normal limits in a normal home environment?

Veterinarian's Name: _____

Address: _____

Phone: _____ Zip Code _____

Environmental Information:

Where and at what age was the dog obtained? _____

Has the dog been in other homes? _____

If you are not the original owner, then why was the dog given up before? _____

Is the dog: [check all that applies]

Indoors _____ Outside _____ Chained _____ Crated _____

Confined by a fence or run: _____ Type of Fence _____ Ht. of Fence _____ Runs free _____

Is the dog: Crate trained _____ House Broken _____ Familiar with stairs _____ Used to riding in cars? _____

Feeding Information: Brand: _____ Wet or Dry: _____

Amount: _____ Times Per Day: _____

Supplements: _____ Treats: _____

Has the dog lived with other dogs: Yes/No Describe: _____

Cats?: Yes/No Describe: _____

Other Animals: Yes/No Type of Animals: _____

Children? Yes/No Ages: _____

Temperament and Characteristics:

Has the dog had obedience training or training of any kind? Yes/No

Titles: _____

Type of Training: _____

What device if any do you use for commands (Voice, Clicker, Hand Signals) _____

Name of trainer: _____ Phone _____

How does the dog react to People? _____

Children? _____

Dogs? _____

Cats? _____

Cars? _____

Strange situations? _____

Can one take food, bones, toys, etc. from the dog? Yes/No

What is dog's reaction if approached frontal? _____

What is dog's reaction if approached sideways? _____

Has the dog ever bitten, injured, or killed anyone or another animal? Yes/No

If Yes, please explain? _____

Date of Bite(s) _____

Does the dog: Chew: Yes/No Dig: Yes/No Bark excessively: Yes/No

Jump fences: Yes/No If Yes, how high of a fence: _____

If YES, to any of the above, under what circumstances? _____

Can you comment on the general behavior of the dog? How would you describe the dog overall?

Is the dog sufficiently sound mentally and behaviorally to function within normal limits in a home environment? Yes/No

If No, Why? _____

Is there any requirement you feel essential for the placement of your dog?

Is there any other information about this dog, which would be important to a new owner? _____

Donation of \$ _____ . If fee waived, why? _____

Signature: _____ **Print Name:** _____

Signature: _____ **Print Name:** _____

Date: _____

Timing Arrangements made? _____

Other Notes:

For Rescue Committee's Information:

Breeder Notified: Yes/No Date: _____

Response _____

Preliminary Adoption Recommendation: Yes/No

If No, reason:

INTERVIEWER'S SUMMARY OF DOG:

Examination of dog to be performed by: _____

(Print Name)

(Signature)

(Date)