

A Diamond in the Ruff
326 Main Street
Northborough, MA 01532
508-393-7833

Pet Personality Profile

Owner's Name: _____
Dog Name: _____
Breed: _____ Color: _____ Male/Female Spayed/Neutered Yes / No
DOB: _____ Microchip #: _____

General Information:

Has your dog ever been in day care before Yes / No
If yes, Where _____ Reason for leaving _____
Is your dog crate trained? Yes / No
Where did you get your dog? Breeder Pet Store Rescue Shelter
Other: _____
If adopted do you have any knowledge of your dogs past history? Yes / No
If yes, please describe: _____
How many people are there in your household? _____
Are there any Children in the house? Yes / No
If yes how does your dog behave around them: _____
How does your dog behave around children in general: _____

Are there other animals in the house? _____

Health and Grooming:

Is your dog taking any medications? Yes / No
If yes, please list the medications and what they are used for:

Does your dog have any known allergies? Yes / No
If Yes what kind? _____
Does your dog have hip dysplasia? Yes / No
If Yes are there any veterinarian recommended restrictions? _____
Does your dog have any other conditions or ailments? _____
How does your dog feel about being brushed? _____
Does your dog have any sensitive areas on his/her body? Yes / No
If yes, where _____

Behavior:

Does your dog act afraid of any specific items or noises such as a vacuum or thunder?
Yes / No If yes, please explain in detail _____

Has your dog ever jumped over a fence? Yes / No If yes, how high was it? _____
Are there any kinds of people your dog automatically fears or dislikes? Yes / No

If yes, please explain: _____

Are there any kinds of dogs your dog automatically fears or dislikes? Yes / No

If yes, please explain: _____

How does your dog react to puppies? _____

How does your dog react to strangers? _____

Has your dog ever growled at a person? _____

If yes, what were the circumstances: _____

Has your dog ever bitten a person? Yes / No

If yes, what were the circumstances: _____

Has your dog ever growled or snapped when food or toys are taken away? Yes / No

If yes, what were the circumstances: _____

Does your dog share well? Yes / No

Does your dog play with any toys? Yes / No If yes, does he protect them? Yes / No

If yes, how? _____

Does your dog play with other dogs? Yes / No

If yes, what kind of play has he/she engaged in? _____

Does your dog prefer to play with male or female dogs? _____

Has your dog had any formal obedience training? Yes / No

If yes, when and where: _____

Does your dog know any specific commands (please explain)? _____

Does your dog have a bathroom command? Yes / No _____

Does your dog have a quiet command? Yes / No _____

Feeding:

How many times a day do you feed your dog? 1X 2X 3X At what time(s) _____

What kind of food do you feed your dog?

_____ Premium Dry Dog Food

_____ Raw Diet

_____ Premium Canned Dog Food

_____ Dry Food purchased from a supermarket, large retailer such as BJ's, Wal Mart or Petco

_____ I cook for my dog

Name of food and how much you feed per sitting: _____

Are there any treats your dog may NOT have? _____

Does your dog have any food allergies? _____

How would you rate your dog's energy level on a scale from 1 (mellow) – 10

(uncontrollable) _____

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