

OF GREATER PORTLAND 449 Stroudwater St. · Westbrook, Maine 04092 (207) 854-9771 · Fax (207) 854-4105

Cat Surrender Profile

General Information

Intake Date:		General III					
Animal ID #:							
Cat's Name:	Age:	;					
Is your cat?	Male	Female	Unknown				
Is the cat spayed/neutered?	Yes	No	Unknown				
Does this cat have:	Tattoo	Microchip	Not sure				
Is this cat declawed?	Front	All 4 declay	wed Not declawed				
If declawed, was it done	As a kitten	As an adult	Acquired declawed				
		<u>Hist</u>	tory				
Why are you surrendering you	our cat?						
How long have you owned y	our cat?						
Including yours, how many	homes has this	s cat had?	-				
Where did you acquire this cat	eat? Fron	n the ARL	Another shelter				
		nd as a stray	Free ad				
		nd/relative	Pet Store				
		der	Born in my home				
	Othe	er					
	Medical History						
Does your cat have a Veterinarian?		Yes	No				
If yes who is the Vet?							
Has this cat been hit by a car	or required o	ther surgery?	Yes No Not sure				
If yes, please explain:							
Does your cat have any othe	r medical con	ditions?					

Personality

Please describe your cat's activity level? Very active Moderately active Couch Potato Friendly to visitors Is your cat? Friendly to family Both Comments: Or do you find your cat to be shy? Yes No Only shy with visitors Is your cat talkative? Yes No Does your cat like to purr? Yes No On a scale please circle your cat's level of affection: Very Affectionate-- 10 9 8 7 6 5 4 3 2 1 0 -- Not Affectionate Would you describe your cat as more social or more independent? Social Independent Which does your cat prefer: sitting in your lap being in the same room sitting next to you none Does your cat enjoy being held? Yes No Some people describe their cats as behaving more like dogs. Is this true of your cat? Yes No On a scale please describe you cat's level of fearfulness Fearless-- 0 1 2 3 4 5 6 7 8 9 10 -- Fearful (Has no fear of anything) (Afraid of everything) Does your cat like to play? Yes No If yes what is your cat's preferred toy? When your cat is playing does he/she use claws? Yes No Does he/she use teeth when playing? Yes No Will your cat fetch items like bottle caps or toys? Yes No Does your cat like to play in or around water? Yes No Does your cat like to play "chase my ankles" and other similar games? Yes No If your cat had a career what would it be? Lifestyle & Home Life What would you consider the activity your household to be like? Middle of the road A library A carnival How many hours per day was the cat left alone? More than 9 hours per day 4-8 hours per day Less than 4 hours per day Was the cat kept indoors only? Yes No If no when was the cat let outside? All the time During the day Only at night Only in good weather

Barn cat (never let inside the home)

Only on a harness

Had access to a cat door

Where is your cat's favorite spot t	to be? (for	example, th	e couch, the	he garde	en)		
Has this cat ever lived with other	cats?	Yes No	Unsur	re			
If yes how many other cats?							
What were the sexes of the other	cats?	Male Fen	nale Bo	th			
Were the other cats spayed and or	neutered?)					
Were these interactions mostly po	sitive or n	egative?	Positive	Negati	ive		
Describe their interactions (circle	all that ap	ply)					
Adored each other	Played	l together		Groon	ned each othe	er	
Slept near each other	Peacet	fully coexist	ed	Tolerated each other			
Ignored each other	Fough	t <i>without</i> inj	uries	Fough	t with injurie	S	
Caused this cat stress Rough with others							
Please provide any additional con	nments on	you cat's in	teractions	:			
Has this cat ever lived with dogs? If yeswhat kind of dog was it? If this cat lived with dogs, how di	(large, med			oply)			
Adored each other				Avoid	ided each other		
Groomed each other	Cat rubbed on the dog			Played with each other			
Peacefully coexisted	Fought without injuries Fought with injuries			S			
Dog chased cat	Cat tormented dog			Cat ran from dog			
Sniffed noses	Ignore	Ignored each other		Cat tolerated the dog			
Other							
Has the cat regularly been around	children?	Yes	No		Not sure		
If yes, indicate what ages:		0-2 yrs.	2-5 yr	·s.	6-10 yrs.	11-18 yrs.	
If this cat lived with children <i>unde</i>	er the age	<i>of 7</i> , how di	d they inte	eract? (c	ircle all that a	apply)	
Cat actively avoided child							
Cat hissed or growled at c	Ignored each other			Mutual adoration			
Other		-					

Have the experiences with the cat and child	(ren) always b	een positive	? Yes	No	
If no, please explain					-
Please tell us some things you truly <i>love</i> abo					-
Does the cat? (circle all that apply)					
Jump on counters/tables	Scratch furni	ture	Chew	Plants	
Scratch doors/cabinets	Chew Person	nal items	Climb	Curtains	
Other					
How did you attempt to correct this problen	n(s)?				
	<u>Dietary l</u>	<u>Habits</u>			
What brand of food is your cat currently eat	ting?				
Are there other brands that the cat has enjoy	ved?				
Does your cat eat? Dry only Canne	ed only	Combinati	ion of dry	& canned	
People food					
What type of treats does your cat enjoy?					
How often is your cat fed? Food always	available	Designate	d mealtime	es	
If fed at designated mealtimes when was for	od provided?_				_
	<u>Litter</u>	box Habits			
We ask so many questions about litterbox u	se because it i	s one of the	main reaso	ns cats are su	ırrendered. Pleas
help us by giving as much detailed informat	tion as possible	e. Sometime	es a change	in environm	ent may be just
what the cat needs, and sometimes there are	e more serious	health or bel	navioral iss	sues involved	l.
Did your cat have access to a litterbox in the	e house?	Yes	No		
If no, did your cat use the bathroom only ou	ıtdoors?	Yes	No		
If yes, did your cat use the litterbox?		Yes	No	Sometimes	,

^{*} If you answered no or sometimes please continue. If your cat used the litterbox you can stop here.

If sometimes, how often does the ca	at make mista	kes?				
Please describe the accidents:	Urinates outside the box			Urinates on clothing/furniture		
	Defecates of	Defecates outside the box All of the above Other		Sprays on walls/furniture		
	All of the a					
How often was the litterbox scooped?		Every day		few days	Weekly	Rarely
Did the accidents occur when the be	ox was left m	essy?	Yes	No		
Where is the litterbox located?						-
What type(s) of litter was used?	Unscented	Scent	ed	Clumping	Non-Clump	oing
	Crystals	Clay	Pine	e Yesterday's N	News	
	Other					_
Are there other animals in your hor	ne? No	Other	Cats	Dogs Birds	Rodents	
If other cats, how many shared a lit	terbox? One	e Two	or more	Many cats sh	ared	
	Mu	ltiple box	es for m	ultiple cats		
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If litterbox accidents were an issue,	when did the	ey begin?	Past n	nonth Past	year On-	going
Can you pinpoint an event(s) that n	night have inf	luenced o	r triggei	red inappropria	te	
litterbox use? (for example: new ba	_					door only)
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Please describe what measures you	have taken to	correct t	his prob	lem.		
Have you tried multiple little boxes	? Y	es N	No			
Have you recently switched litter?	Y	es l	No			
Has your cat been to the veterinaria	n to rule out	infection o	or under	lying health iss	sues?	
	•	Yes	No			
If yes, what was the outcome?						

Please use the back to add any additional comments about your feline friend. Thank you!