

Cat Surrender Profile

The Edmonton Humane Society recognizes that the decision to surrender an animal is difficult. Our intention is to give your animal the best possible care during their time with us. The purpose of this profile is to evaluate your cat for placement in the most appropriate home. No one knows and loves your cat the way you do; please take the time to complete the profile with care and accuracy.

Please note that any behaviour problems listed on the profile will not necessarily determine whether or not your cat is adoptable. Please be honest to allow our staff to provide the best care for your animal.

General Information

Date: _____ Cat's Name: _____

Where did you get this cat?

- | | | |
|---|-----------------------------------|------------------------------------|
| <input type="radio"/> Edmonton Humane Society | <input type="radio"/> Found/Stray | <input type="radio"/> Rescue Group |
| <input type="radio"/> Other Animal Shelter | <input type="radio"/> Pet Store | <input type="radio"/> Breeder |
| <input type="radio"/> Friend/Relative | <input type="radio"/> Gift | <input type="radio"/> Other |
| <input type="radio"/> Newspaper/Online | <input type="radio"/> Own Litter | |

How long have you had this cat?

What is the main reason you are admitting your cat to us?

Has your cat been to a veterinarian clinic to your knowledge?

- Yes (If yes, what is your vet clinic's name) No

Please let admitting staff know if the cat would have its information under a different owner name at the clinic. If Yes, Who?

To your knowledge, is your cat spayed/neutered?

- Yes No Do not know

Are there any medical concerns we should be aware of?

- Yes** (If yes, please explain) **No**

Has your cat ever bitten with puncture?

- Yes** (If YES, when did the bite occur?) **No**

Please describe what happened _____

What type of food does your cat eat?

- Dry** **Canned** **Both Dry and Canned**

What brand of food is your cat used to? _____

How often is your cat fed?

- Food always available** **Designated mealtimes**

Bathroom Habits

What litter is your cat used to?

- Clumping** **Non-Clumping** **Other** _____

What type of litter box is used?

- Small non-covered** **Small covered**
 Medium non-covered **medium covered**
 Large non-covered **large covered**
 Self-cleaning **Other** _____

How many litter boxes are in your home?

How many other cats do you have?

Does your cat eliminate outside the litter box? If NO please continue to "other information"

- Yes** **No**

IF, your cat eliminates outside the litter box, Does your cat..

- Defecate Only
 Urinate Only
 Both

Where are the litter box(es) located?

Have you changed the location of the litter box(es) recently?

How often are the litter box(es) cleaned?

How far away from the litter box is the accident?

- Within 3 feet of the litter box
 More than 3 feet from the litter box
 Another room

How long has this been going on?

Have you sought medical attention for this issue?

- Yes
 No

If yes, what steps have you taken, if NO please continue to "other information"

- Vet Exam
 Special diet
 Behavior evaluation
 Urinalysis
 Medications

Have there been any stressful changes in the household?

- New person in the house
 Moved recently
 Other _____
 Change in litter
 New pet

Have you notices your cat straining or crying when urinating in or out of the litter box?

- Yes If YES (please explain)
 No

Other Information

Does your cat walk on a leash?

- Yes
 No

What are your cat's favorite toy(s)/game(s)?

What does your cat use for scratching?

- | | | |
|--------------------------------------|---|--------------------------------|
| <input type="radio"/> Scratch Post | <input type="radio"/> Furniture | <input type="radio"/> Declawed |
| <input type="radio"/> Scratch Mat | <input type="radio"/> Walls/doors | |
| <input type="radio"/> Door Scratcher | <input type="radio"/> Unknown/Doesn't scratch | |

IF your cat is declawed, it is declawed on its:

- | | |
|-----------------------------|--------------------------------|
| <input type="radio"/> Front | <input type="radio"/> All paws |
|-----------------------------|--------------------------------|

If yes, when was the procedure done? _____

Are there areas on your cat's body that the cat does NOT like to be touched?

Are there any other animals in your home?

- | | | |
|---------------------------------|-----------------------------------|------------------------------------|
| <input type="radio"/> No | <input type="radio"/> Female Cats | <input type="radio"/> Other: _____ |
| <input type="radio"/> Male Cats | <input type="radio"/> Dogs | |

How is your cat with the cats in the household?

- | | | |
|----------------------------------|-------------------------------|------------------------------------|
| <input type="radio"/> Friendly | <input type="radio"/> Fearful | <input type="radio"/> Uninterested |
| <input type="radio"/> Aggressive | <input type="radio"/> Playful | |

How is your cat with the dogs in the household?

- | | | |
|----------------------------------|-------------------------------|------------------------------------|
| <input type="radio"/> Friendly | <input type="radio"/> Fearful | <input type="radio"/> Uninterested |
| <input type="radio"/> Aggressive | <input type="radio"/> Playful | |

How does your cat act around children? What are the ages of the kids in the home?

- | | |
|---|---|
| <input type="radio"/> Hides | <input type="radio"/> Plays but is a little rough |
| <input type="radio"/> Hisses | <input type="radio"/> Plays with no scratches/bites |
| <input type="radio"/> Scratches when held | <input type="radio"/> Calm |
| <input type="radio"/> Bites when held | <input type="radio"/> Never around children |

How does your cat act around adults in the home?

- | | |
|---|---|
| <input type="radio"/> Hides | <input type="radio"/> Plays but is a little rough |
| <input type="radio"/> Hisses | <input type="radio"/> Plays with no scratches/bites |
| <input type="radio"/> Scratches when held | <input type="radio"/> calm |
| <input type="radio"/> Bites when held | |

How does your cat act around strangers?

- | | |
|---|---|
| <input type="radio"/> Hides | <input type="radio"/> Plays but is a little rough |
| <input type="radio"/> Hisses | <input type="radio"/> Plays with no scratches/bites |
| <input type="radio"/> Scratches when held | <input type="radio"/> Calm |
| <input type="radio"/> Bites when held | <input type="radio"/> Never around |

Your cat's behavior is usually? (check all that apply):

- | | | |
|------------------------------------|--|-------------------------------|
| <input type="radio"/> Affectionate | <input type="radio"/> Playful | <input type="radio"/> Lap Cat |
| <input type="radio"/> Couch Potato | <input type="radio"/> Vocal | <input type="radio"/> Quiet |
| <input type="radio"/> Fearful | <input type="radio"/> Does not like to be held/picked up | <input type="radio"/> Active |
| <input type="radio"/> Independent | | |

Is your cat used to:

- | | | |
|--------------------------------|-------------------------------------|---------------------------------|
| <input type="radio"/> Brushing | <input type="radio"/> Nail Trimming | <input type="radio"/> Traveling |
| <input type="radio"/> Bathing | <input type="radio"/> Medicating | |

Where has your cat lived?

- | | |
|---|---|
| <input type="radio"/> indoors (only) | <input type="radio"/> outdoor/indoor (free roaming) |
| <input type="radio"/> indoor with supervised time outside | <input type="radio"/> strictly outside |

Please feel free to give us any additional helpful information:

The Edmonton Humane Society is a charitable organization that relies on donations to operate.

Surrender fees help recoups the cost of:

- *Providing food and general care*
 - *Veterinary Care*
 - *Spaying/Neutering*
 - *Vaccinations*
 - *Micro chipping*
 - *Maintenance of the shelter*
- *Some animals will also require extra medication, treatment, and surgery.*