



Behavior Questions:

Owner Name: _____ Dog Name: _____

Where does your dog stay when you are gone? (ex. crate, yard, loose in house)

Has your dog ever growled at or bitten a human? Yes No If yes, please explain

Has your dog ever growled at or bitten another dog? Yes No If yes, please explain

Is there anything your dog automatically fears or dislikes?

Are there any places on your dog that he/she does not like to be handled? Please explain their reaction...

Has your dog ever had formal obedience training? Yes No

Please check the behaviors you have witnessed or know your dog has shown:

- | | |
|--|---|
| <input type="checkbox"/> Inappropriate chewing | <input type="checkbox"/> Fence jumping |
| <input type="checkbox"/> Excessive barking | <input type="checkbox"/> Snapping at a person |
| <input type="checkbox"/> Toy guarding | <input type="checkbox"/> Ignoring commands |
| <input type="checkbox"/> Food guarding | <input type="checkbox"/> Digging |
| <input type="checkbox"/> Mouthing | <input type="checkbox"/> Potty accidents |

Please list any other comments or information about your dog that may be helpful.
