Canine Behaviour Questionnaire

# **Owner’s Information**

Today’s Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(MR/MRS/ MISS/ MS) Surname:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First name/ initials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Postcode:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (day): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (evening): \_\_\_\_\_\_\_\_\_\_\_\_\_(mobile): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please include as much information as possible. The more detail available, the more accurate our assessment of the case can be. Please use additional sheets where necessary.**

Have you owned a dog before? Yes [ ] No [ ]

Have you owned this breed before? Yes [ ] No [ ]

Have you owned other pets previously? Yes [ ] No [ ]

Please list any other current household pets

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Type & Breed | Name | Age | Spayed/ Neutered? | Relationship with dog (e.g avoids/ plays/ fights) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Please list the names, ages and occupations of other household members

|  |  |  |
| --- | --- | --- |
| Name | Age | Occupation |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Have you moved with your dog within the last 12 months? Y N

Have you added or lost any pets within the last 12 months? Y N

Have you added or lost any family members within the last 12 months? Y N

How did you hear about me?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What was the trigger to seek help? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REFFERAL DETAILS. THE CONSULTATION CANNOT GO AHEAD UNLESS ALL THREE QUESTIONS ARE ANSWERED:**

1. Full name of referring veterinary surgeon:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Referring veterinary practice name and address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Method of referral- **please tick one of the following**

**[ ]** Referral form signed by vet- already returned by you/by vet to Raychel Hill by (*enter post/email)*

**[ ]** Referral form signed by vet- will be returned to Raychel Hill by *(enter post/ email)* by *(date)*

**[ ]** Referral from will be signed/ signed- kept by owner until consultation date

**[ ]** Veterinary surgeon named above to email medical history direct to Raychel Hill

# **Patient Information**

 **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed (or mix): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Sex: MALE [ ] FEMALE [ ] MALE NEUTERED [ ] FEMALE NEUTERED [ ]**

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age when obtained: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date first acquired: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Source: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason(s) for obtaining your dog: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has your dog been used for breeding? Yes [ ] No [ ] If so at what age? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How would you describe you dog’s personality? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Would you consider your dog to be:

[ ] Aggressive? (Growling, snarling, snapping, nipping, biting)

[ ] Destructive? [ ] Hyperactive/ restless? [ ] Disobedient? [ ] Housetrained?

[ ] Nervous? [ ] Excited? [ ] Noisy/ excessive vocalization?

[ ] Depressed? [ ] Demanding Attention? [ ] Playful?

 **A Medical History**

1. Please give a brief medical history, especially recurrent problems and treatments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Vaccination Status \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Last Wormed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Is your dog currently on any regular medications (such as allergy medication, heartworm treatment, herbal or homeopathic remedies) ?

|  |  |
| --- | --- |
| Drug/ Remedy | Dose |
|  |  |
|  |  |
|  |  |

1. Has your dog ever been on / is currently on medication for his/her behaviour? Yes [ ] No [ ]

If yes, please list name and dose (including herbal/ homeopathetic)

|  |  |  |
| --- | --- | --- |
| Date | Drug/ Remedy | Dose |
|  |  |  |
|  |  |  |
|  |  |  |

 **B Early Life and Socialisation**

1. Please give details of your dog’s early life, if known, including litter size, age of weaning, age when obtained, whether raised inside/ outside, if orphan or stay, whether hand- reared, met the parents, any problems with parents etc?

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1. How much interaction did your dog have with people in the first year of his/her life?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What was your dog like when you picked them up and when you first brought them home?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Did s/he show fear of any avoidance of anything even briefly?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What method of house training was used? How was accident dealt with?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What age did your puppy has their first vaccinations and what age did you start taking him out? Did you carry him “out and about” at all?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Did you attend any puppy parties/ puppy classes? Yes [ ] No [ ]

Details? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Approximate numbers of unfamiliar/ new people and dogs met (a guestimate is okay)-** only counting encounters where your dog has sniffed/ greeted a person/ dog and has done so willingly and without aggression/ fear.

1. In total, between leaving the breeder and reaching 16 weeks of age?

Humans: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of which, how many where children and ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dogs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In an average month, between 16 weeks and 1 year of age?

Humans: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of which, how many where children and ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dogs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In an average month, after 1 year of age?

Humans: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of which, how many where children and ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dogs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **C Traumatic Experiences**

Has your dog suffered any traumatic experiences- either before or after onset of the behavior problem (in roughly chronological order) :

|  |  |
| --- | --- |
| Date/ Age of Dog | Incident |
|  |  |
|  |  |
|  |  |
|  |  |

# **D Punishment**

Have you- or anyone else- ever used any form of punishment on your dog apart from **mild** verbal distraction. Examples include smacking/ tapping nose (or threatening), rolled up newspaper used on dog or furniture, shouting, lead jerks, noise devices (eg ultrasound or Pet Corrector), water sprays, rattle cans/ bottles. Please include use of choke chains, slip leads or any type of collar that emits something (eg. Emits a spray, noise, shock, vibration etc). Please give details below including purpose of punishment/device your dog’s reaction and when/ how long it was used for:

|  |  |  |  |
| --- | --- | --- | --- |
| Punishment | What it was used for | When (dates) used  | Dog’s reaction |
|  |  |  |  |
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# **E The Behaviour Problem**

Please list each main problem separately, please describe in detail how each of your dog’s main behavior problem(s) have developed. Each of the following counts as a single main problem and needs to be listed separately (this doesn’t not necessarily mean that that are not related): aggression towards unfamiliar people, aggression towards the owners/ familiar people, aggression towards children, aggression towards unfamiliar dogs, aggression towards familiar dogs, chase/ recall problems, separation problems, noise phobias, house soiling (this is not a complete list).

|  |
| --- |
| Problem 1:  |
|  |
| Problem 2:  |
|  |
| Problem 3: |
|  |
| Problem 4: |
|  |
| Problem 5:  |
|  |

If aggression is involved, please detail whether your dog ever makes physical contact with people/ animals with his teeth and if so, whether any physical injury (including skin break) has resulted:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Does your dog ever show any aggression, or anything that might be perceived as aggression, towards human visitors coming to your property? Yes [ ] No [ ]

If yes, please describe and state how you manage this currently:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Does your dog bark repeatedly or persistently (more than a few seconds) in response to anything?

Yes [ ] No [ ] If yes, what would trigger this? :

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your dog bark persistently at unfamiliar people? Yes [ ] No [ ]

If yes, how long would this continue for? :

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you noticed any patterns that relate to any of your dog’s behaviourial problems? Yes [ ] No [ ]

If yes, please describe:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have more than one dog, what difference does the presence or absence of the other dog(s) make to the behavior problem(s)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If relevant) when did you first see any signs of aggression towards anyone/ anything?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What have you done (if anything) so far to a) correct or b) manage the problems?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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# **F Additional Information about your Dog**

 **Where is your dog when s/he is home alone?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where does your dog sleep at night? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Does your dog have a crate?** Yes [ ] No [ ]

Does your dog like the crate? \_\_\_\_\_\_\_\_\_\_\_\_\_ Where is the crate located? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your dog chew or destroy the crate? \_\_\_\_\_\_\_\_\_\_\_

How many hours does your dog spend alone each day? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What kind/brand of food do your feed your dog?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How much and how often does your dog eat? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is food left out during the day for your dog to eat? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What kind of toys does your dog have daily access to?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long does your dog play with toys? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where are the toys kept when not in use? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What kind of equipment do you use to walk your dog?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What sort of exercise does your dog receive?** (off lead runs, on lead walks, agility training etc.)

|  |  |  |  |
| --- | --- | --- | --- |
| Type | Purpose | Amount | Frequency |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**How does/ would your dog react to the following?**

1. Being shut in a room completely alone behind a closed door while you are elsewhere in the house?
2. Shut in a crate/ behind a stairgate in sight of family members?
3. Left totally alone in the house?
4. Family mealtimes/ someone eating?
5. Dog mealtimes?
6. An unfamiliar person coming to the house/ door?
7. A familiar person coming to the house/ door?
8. In the garden
9. Travelling in the car
10. Noises heard in the house or garden (eg. Dog barking, door slamming)?

Please indicate if your dog shows any aggression, anxiety or avoidance to any of the following situations: [ ] Handling/ grooming [ ] Disturbed whilst resting [ ] If reprimanded

[ ] if trying to take toys, food etc away [ ] Being cuddled/ hugged etc.

Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your dog allowed on the furniture? Does s/he get off immediately when asked? Does s/he show any aggression in this situation? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your dog have any dog friends? Yes [ ] No [ ]

# **G Training History**

Have you attended training classes with your dog? Yes [ ] No [ ] If yes, please state the age your dog was when you attended and nature of class and duration- any problems with the classes:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Does your dog walk nicely on a lead? Does your dog come when called in all situations? How did you teach this? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Does your dog drop or give objects when asked? How did you teach this?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **H Rehabilitation & Goals**

How do you rate your family’s commitment to improving your dog’s problems, including the amount of effort and time you are willing to put in and your willingness to change your routines and ways of doing things? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What would you envisage happening if the behaviour problem persists as it is now, or gets worse?

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Which areas of your dog’s behaviour would you ideally like to improve? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is the single one or two most important things that you would like to change about your dog’s behaviour? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **F Additional Information**

Do you have parking at your home? Yes [ ] No [ ]

If not, where is the closest car park or on-street parking?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is there anything I need to know travelling to your home?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you happy for a student to be present at our consultation? Yes [ ] No [ ]

**Please email/ send via What’s App a photo of your dog to be included in your plan**