



RETURNED ADOPTION FORM

CANINE

I, undersigned, owner or having control of the animal described below, hereby give ownership of said animal to the Butte Humane Society to be placed for adoption or humanely euthanized, at the discretion of the Society. I assume all responsibility for damages caused during my ownership of said animal. I agree to make all veterinarian records for said animal available to the Society and adopter of said animal.

____ (Please initial) I certify that, to my knowledge, this animal has not bitten or scratched anyone in the past fourteen days or been exposed to rabies.

____ (Please initial) I understand and agree that the Society reserves the right to either place for adoption or humanely euthanize this animal.

Signature: _____ Date: _____

Printed Name: _____

Address: _____ City: _____ Zip: _____

Primary Phone: _____ Alternate phone: _____

Please provide us with the following information:

Dog's name _____ Previous name _____

How long have you had the dog? _____

Why are you returning this pet? (Please give detailed explanation of why) _____

Did you attempt umbilical training for the first 24 hours? _____

How did the dog respond to umbilical training? _____

Did you attempt to crate train this animal? _____

How did the dog respond to crate training? _____

Did the dog spend its time: Indoors Outdoors both

Is the dog housebroken? yes no partially

How many hours a day was the dog left without human contact? _____

Where was the dog when left alone? _____

Is the dog destructive when left alone? always sometimes never

Where did the dog sleep at night? _____

Did the dog live with children? yes no

If yes, please list ages: _____

Have the dog's experiences with children always been positive? yes no (please explain) _____

Has this dog lived with cats? yes no

Would you recommend the dog live with cats in it's new home? yes no I don't know

Has the dog ever hurt a cat? yes no

If yes, please explain circumstances and the extent of injury _____

Has the dog been around livestock or chickens? yes no

Has the dog ever hurt or attempted to hurt a livestock animal? yes no

If yes, please explain the extent of injury and circumstances _____

Is the dog from a single dog household? yes no

Does it get along with other dogs? always usually sometimes never

If no, explain _____

Has it ever been in a severe dog fight in which either dog was injured? yes no

If yes, explain _____

How does the dog react when:

New visitors enter the house? _____

It sees a jogger or a person on a bike? _____

You take away its favorite toy or bone? _____

It's disturbed when sleeping in its favorite spot? _____

You take away its food? _____

What type of people does the dog feel most comfortable with? children teenagers men women elderly

Will the dog let you : Brush it? yes no Clip its nails? yes no Bathe it? yes no

What, if any, behavioral problems does the dog have? _____

Has the dog ever bit a person for any reason? yes no

(Please know that this question does not necessarily determine the outcome of the dog.)

If yes, please describe the circumstances: _____

What would have to happen for you to keep this dog? _____

Additional Comments: _____

Have you taken this dog to the vet? _____ Which one? _____

Does it have any medical problems? yes no

If so, please describe. _____

Is it on any medications? yes no

If so, please describe. _____

Has it received any additional vaccines? Please list: _____

DO NOT WRITE BELOW THIS LINE

Butte Humane Society Representative Date

Notes: _____

OR Counseling: Not Needed Dogs Cats Bite history Behavioral Other: _____