

Behavior Consult Questionnaire

To be filled in at least 2 days prior to your behavior consult lesson

Client Information

Full Name:

Address:

Phone:

Email Address:

Veterinarian:

How did you hear about us?

Dog Information

Dog's Name

Breed

Age

Sex Male

Female

Desexed?

Yes

No

Age when desexed:

Was your dog desexed due to a behavior problem?

Did notice a difference in your dog after desexing?

Are your dog's vaccinations up to date?

What type of exercise does your dog receive and how often?

When is your dog fed?

Morning

Evening

Both

What do you feed your dog?

Canned food

Dry food

Table scraps

Raw diet

If you feed dog food, which brand is it?

Which best describes your dog's eating habits?

Fussy

Does your dog like children? If not, explain

Please explain how your dog gets along with other animals in the household

How does your dog react to guests and strangers?

How does your dog react to unknown dogs?

Previous Training

Has your dog ever been to obedience school or private lessons? If so, where did your dog attend and for how long?

Will your dog lie down on command?

Does your dog pull on the lead when being walked?

What equipment do you use to walk your dog? ie flat collar, check chain, harness, flexi lead

Reason For Consult

What is your dog's most undesirable behavior?

Please list all other undesired behaviors in order of highest priority to lowest

Aggression

Describe any and all instances of aggression including, lunging, growling, biting or baring teeth:

Final Comments

Any additional comments or information you think I should know?

To the best of your knowledge, have you ever had a dog with parvovirus on your property?

Does your dog have any medical conditions? If so, please explain, including any medications that your dog is on

General Information

How old was your dog when you acquired it?

Had the dog had previous owners? If yes, please explain

Where did you get your dog?

- Breeder
- Pet Store
- Animal shelter
- Friend
- Other

Is your dog allowed inside? If no, why is this? If yes, how often?

Normal appetite

Gluttonous

If your dog doesn't eat all food at once, how long is the food left down?

Where does your dog sleep?

On the bed

Kennel

On own bed, inside

On own bed, outside

In a crate

Other

Does your dog have any toilet training problems?

Family & Other People & Animals

Please describe the social layout of the family (people and pets) and the dog's place in it

Has your household changed since acquiring the dog? If so, please explain

Dog Selection

Why did you decide to get a dog?

Companion

For child

Protection

Did you notice anything unusual as a puppy?

Why did you choose this breed?

Have you owned other dogs in the past and if so which type/s?

While You Are Out

Describe your dog's reaction to being left alone

Where do you leave your dog when you go out?

Describe your dog's reaction when you return home

Do you use a crate?

Yes

No

Has there been a change in frequency or severity of the problem? Please describe

What have you tried so far to fix the problem?

Why do you think the dog is displaying these behavior problems?