



For Office Use only:
Animal Number:

Small Animal/Exotics Surrender Profile

Pet species _____ Name: _____ Breed, if applicable _____
 Color: _____ Age: _____ Is this animal descended? Yes ___ No ___
 Sex (please circle): Male Female Is this pet spayed or neutered? Yes ___ No ___ If, yes. Date: _____
 Is this animal microchipped? Yes ___ No ___
 Who is your veterinarian? _____
 Where did you acquire this pet? _____
 How long has this pet lived with you? _____ Was the pet housed? Indoors ___ Outdoors ___
 If housed indoor, does it like trips outdoors? Yes ___ No ___
 Does this pet walk on a leash? Yes ___ No ___
 In what kind of enclosure was this pet housed?
 Single level cage ___ Multi level cage ___ Aquarium ___ Free Roam ___ Other ___
 If other, please describe _____
 If applicable, on average how many hours a day does this pet spend outside of its cage? _____
 What type of bedding do you use?
 Cloth ___ CareFresh ___ Newspaper ___ Pine or Cedar shavings ___ Pine Pellets ___ Other ___
 If other, please describe _____
 Does this pet use a litterbox? Yes ___ No ___
 If yes, which type of litterbox? Corner pan ___ High back pan ___ Regular cat pan ___ Other ___
 If applicable, what type of litter do you use? _____

What type of food does this pet eat? _____
 What treats does this pet like? _____
 Does this pet take any supplements? _____
 What types of toys or games does this pet like? _____
 How many of the following people lived with this pet?
 Adult men ___ Adult women ___ Seniors ___ children: ___ Ages of children _____
 How do you describe your household? Active ___ Noisy ___ Average ___ Quiet ___

Has this pet ever nipped or bitten? Yes ___ No ___ If yes, please describe _____
 Does this pet do any tricks? Yes ___ No ___ If yes, please describe _____
 Do you have any other pets that this pet had regular contact with? Yes ___ No ___ If yes, how many? And what kind? _____
 Does this pet have any medical problems? Yes ___ No ___ If yes, please describe _____
 Why are you surrendering this pet to the shelter? _____

Revised 04/07/2021

STAFF USE ONLY:
 Reviewed by: _____ Date: _____
 Counseled about alternatives: _____