

DIXIE OLD ENGLISH SHEEPDOG RESCUE, INC.
QUESTIONS FOR SOMEONE GIVING UP A DOG

Date: _____ Dog's name _____

Age _____ Weight _____

Sex ___ Spayed ___ Altered ___ Tail _____ AKC records _____ Deaf _____

Present Owner _____

Address _____

Email _____

Home phone _____

Work phone _____

Children _____ how many _____ ages _____

Other animals _____ how many _____ types _____

Where did you get this OES? _____

Name of breeder/pet store _____

Address & phone of breeder/pet store _____

How long have you owned the dog? _____

Reason for giving up _____

How soon must you, or how desperate are you to give up the dog? Would you be willing to keep the dog until it is placed?

DIXIE OLD ENGLISH SHEEPDOG RESCUE, INC.

Coat length (puppy cut, full length, shaved?) _____

Last groomed? (Date) _____

Groomer's name, address, phone _____

Does dog need to be groomed now? _____ matted _____ bath _____

How does dog react to being groomed? _____

Food type and amount:

Feeding
schedule _____

Housebroken? _____ if yes, how long can dog left? _____

What signal does dog give? _____

Is dog on lead or left alone for "potty"? _____

Any information about the previous owner (if any) will be appreciated in the space below.

Previous owner's
name _____

Address _____

Email _____ Phone (home) _____
(work) _____

Children _____ how many _____ ages _____

other animals _____ how many _____ types _____

Reason for giving
up _____

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Commands dog responds to:

Please answer either (always - sometimes - never)

Sit_____ Down_____ Stay_____ Come_____ Heel_____

Others_____

Is dog leash trained? _____if yes, (Good-fair-bad)

Is your yard fenced? __Is dog allowed to run loose? __On leash at all times? ____

Can you take dog for a walk off leash? _____

Comments_____

Health History

Do you have all medical records with you? _____

Veterinarian' Name_____

Address_____

phone_____

Rabies _____ Tag #_____ date_____

Distemper_____ date_____

Hepatitis_____ date_____

Parainfluenza _____ date_____

Parvovirus _____ date_____

Leptospirosis_____ date_____

Bordetella_____ date_____

Corona_____ date_____

Fecal_____ date_____

Heartworm - date tested_____ last given _____ type _____

Please describe general health - including history of arthritis, colitis, skin problems, allergies, etc. _____

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Typical day for the dog

Please list what the dog is doing and with whom during the following times:

5:00am _____

6:00am _____

7:00am _____

8:00am _____

9:00am _____

10:00am _____

11:00am _____

12:00 Noon _____

1:00pm _____

2:00pm _____

3:00pm _____

4:00pm _____

5:00pm _____

6:00pm _____

7:00pm _____

8:00pm _____

9:00pm _____

10:00pm _____

11:00pm _____

12:00 midnight _____

1:00 to 4 am _____

DIXIE OLD ENGLISH SHEEPDOG RESCUE, INC.

How many hours (maximum) can this OES stay alone? _____

How does dog behave when alone? _____

Is dog confined or allowed run of the house when alone? _____

Has dog been crate trained? _____

Please circle one below.

When left alone inside, is dog:

loose? Confined to one room? Crated? Basement? garage?

Temperament

Please check all that best describe the dog:

aggressive_____ confident_____ dominate_____ excitable_____

hardheaded_____

laid-back_____ nervous_____ responsive_____ sedate_____ shy_____

stubborn_____ submissive_____ timid_____ hyper_____ puppyish_____

cooperative_____ frantic_____ sweet _____ playful_____

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Characteristics and Peculiarities

The following is a list of dog behavior problems. Please list either (always - sometimes - never). If always or sometimes, please describe (when, where, why, etc.).

Barking excessively - under what conditions? _____

Begging _____

Biting - under what circumstances? _____

Growling _____ when _____

Showing teeth _____ when _____

Car behavior when riding _____

Car chasing _____

Car sickness _____

Cat chasing _____

Chewing - destructive _____

Digging _____

Dog fighting _____

Excessive wetting _____

Food guarding _____

Garbage ransacking _____

Grooming _____

Herding _____

Housebreaking
"mistakes" _____

Jealousy _____

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How is dog with children, and can dog be trusted with infants and small children?

Protective? _____ Of whom? _____

How does dog react with strangers, other dogs and animals? _____

fences _____

Jumping on furniture _____

Jumping on people _____

Leash rejection _____

Pulling on leash _____

Mounting _____

Nipping and mouthing _____

Fear of confinement _____

Fear of noises _____

Fear of people _____

Running away _____

Stealing food _____

Separation anxiety _____

Unique #1 _____

Unique #2 _____

Unique #3 _____

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Before this dog can be placed in a new home, he must be groomed, updated on inoculations and have a current heartworm test. We also recommend that the dog be altered. If the owner is unable to do these things, we ask for a donation to help cover these expenses. We realize that every situation is different and our main concern is the welfare of the dog. Thank you for your cooperation. I, (owner of said dog), have read, understood, and answered all of the above questions completely and honestly, making no misrepresentations concerning the temperament, health or behavior of the above named dog.

Date_____

Signed_____

(Owner)

(Witness)

Send completed form to:

Marie Harrington, 5038 SE 6th Avenue, Ocala, FL 34480
352-622-4574 SheepieMum@cox.net