Please tell us about your dog's behavior

Today's date:/ Client's name:			_
Dog's name:	Dog's date of birth:/ Is this birth date \square estimated?	['] □know	/n?
Dog's breed:	_ Dog's sex: □ M □ MC □ F □ FS Age at adoption: □ weeks	□montl	hs
ls your dog house trained: ☐ Yes ☐ No			
		Yes N	10
Do you have any worries, complaints, or problems	with urination in the house now?		
Do you have any worries, complaints, or problems	with defecation in the house now?		
Does your dog experience periodic bouts of diarrhea?			
Does your dog destroy anything (for example, doors, windows, sofas, shoes, or other objects)?			
Does your dog mouth anything or anyone?			
Does your dog make any sounds that worry you?			
Does your dog growl, bark, snarl, or bite?			
Does your dog pull on the lead or do other things t	hat make it hard for you to walk with a leash?		
Have you ever worried that your dog is aggressive t	ro people?		
Have you ever worried that your dog is aggressive to other dogs?			
Have you ever worried that your dog is aggressive to animals other than dogs?			
Has your dog ever bitten anyone, regardless of the circumstances?			
Have your dog's sleeping habits changed?			
Have your dog's eating habits changed?			
Has your dog's ability to move around or jump on t	he bed changed?		
Has anyone ever told you that they were afraid of your dog?			
Is your dog behaving in any way that worries you o	r about which you would like more information?		