

Evaluation / Assessment Questionnaire



Owner Name: _____

Address: _____

Contact Phone Number: _____

Email Address: _____

Dog's Name(s): _____

Dog's Age(s), Sex: _____

Is dog spayed/neutered (circle one)? Yes or No

Dog's Breed (or mix): _____

Does the dog have any formal obedience training (circle one)? Yes or No

How long have you owned the dog(s)? _____

Where did you obtain the dog(s)? _____

Have there been any significant changes in the dog's health, behavior, environment (move, death, divorce, etc.)? If yes, explain:

Please briefly describe the purpose of your evaluation today. If there was an incident, please explain the incident in your words, the facts of the case in question etc.

Any additional comments, relevant information, etc. Turn over to enter additional information.

I hereby declare that the above information is true to the best of my knowledge and belief.

Owner Signature and Date