

Date:_			
A#:_			

Small Companion Animals Personality Profile

Animal(s) uses a litterbox: ☐ Yes ☐ No

Type of pets(s):	;				
Rabbit	Guinea Pig	Hamster	Gerbil	Mice	Rat
Ferret	Chinchilla	Bird:		Other:	
Pet's name:					
Gender: 🗆 Mal	e □ Female S	Spayed/Neutere	ed: 🗆 Yes 🗆 No	1	
Where did you	acquire this anir	mal(s):			
How long have	you owned this	animal(s):			
Surrendering re	eason:				
Has the animal	(s) ever given bir	rth: □ Yes □ No			
Has the animal	(s) ever been in (contact with an	y other anima	l(s): □ Yes □	No
Same or other	species:	When	was the last	time:	
How did s/he g	et along with the	e other animal:			
Has the animal	(s) been housed	indoors or out:	□ In □ Out □	Both	
Type of habitat	t (tank, wire cage	e, free roaming i	in house):		
What bedding I	materials were u	sed for the anir	mal(s):		

Has the animal(s) ever been to a vet: □ Yes □ No
Name/phone number of vet:
What brand of (commercial) food has the animal(s) been eating: Pellets: Hay: Other:
What else do you feed your animal:
How does the animal drink water - bowl or bottle:
Animal(s) temperament/personality (friendly, shy, aggressive, fearful, etc.):
Favorite toys: Games:
Animal(s) is afraid of:
Health issues
What health problems has the animal(s) had: (fleas, ticks, fur mites, ear mites, dental problems, skin problems, runny eyes, runny nose, sneezing, anorexia, digestive problems):
What type of treatment did you seek:
Have the health issues occurred within the past 12 months:
Additional comments: