

# DuPage County Animal Services

## Small Animal Behavioral & Health Profile

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Pet's Name \_\_\_\_\_ Sex  Male  Female Spayed or neutered?  Yes  No

Species/Breed \_\_\_\_\_ Age \_\_\_\_\_ How long have you had your pet? \_\_\_\_\_

Where did you get your Pet?

- DuPage County Animal Services    Friend/Relative    Website/Newspaper  
 Breeder    Pet Store    Found Stray    Other Shelter/Rescue \_\_\_\_\_

Why are you surrendering your pet? \_\_\_\_\_

### **Housing Information**

Please describe the housing provided for the animal \_\_\_\_\_

What material was used to line the cage? \_\_\_\_\_

What toys, perches, dishes, etc. were used in the cage? \_\_\_\_\_

What type of heat source (if any) was used? \_\_\_\_\_ How many hours per day? \_\_\_\_\_

What type of light source (if any) was used? \_\_\_\_\_ How many hours per day? \_\_\_\_\_

### **Diet**

Describe your pet's diet:

Nutrients	Yes or No?		Brand/Type
	Yes	No	
Dry Food	Yes	No	
Hay	Yes	No	
Fresh Foods	Yes	No	
Treats	Yes	No	

### **Health**

Has the pet had abnormal stool or urine recently? \_\_\_\_\_ If yes, please describe \_\_\_\_\_

Has the pet shown changes in activity level, food consumption, or behavior? \_\_\_\_\_ If yes, please describe \_\_\_\_\_

Are there any additional health issues we should be aware of? \_\_\_\_\_

By signing below, I certify that the information I provided is accurate and truthful to the best of my knowledge.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Pet's Name: \_\_\_\_\_

Reviewed by (staff only): \_\_\_\_\_