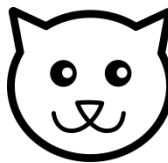




## Cat History Form

Jefferson City Animal Shelter  
Jefferson City, MO  
573-634-6429



For internal use only

Cage: \_\_\_\_\_

ShelterPro#: \_\_\_\_\_

In order for us to place your pet in the best suited environment, we ask that you complete this questionnaire as fully and truthfully as possible. All information will be provided to potential adopters.

**Why are you surrendering your pet today? Please be more specific than "can no longer care for"**

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**Cat's Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **How old was this cat when you acquired him/her?** \_\_\_\_\_

**Sex:**  Male  Female      **Sterilized (spayed or neutered):**  Yes  No

**Has the cat had previous homes?**  Yes  No      **If Yes, how many?** \_\_\_\_\_

**Has this cat been declawed?**  No  Yes-front  All four declawed

**If yes, when was this cat declawed**  As a kitten  As an adult  Unsure

**How was the cat obtained?**

Jefferson City Animal Shelter  Free-to-good-home ad  Pet shop  Gift  Found as a stray  
 Another Shelter: \_\_\_\_\_ (did you sign an agreement to return the cat to this shelter?  Y  N)  
 Friend/ Relative Stray  Breeder  Born in my home  Other: \_\_\_\_\_

**Has this cat ever been aggressive towards people or animals? (check all that apply)**

Yes, has bit people  Yes, has bit other cats  Yes has bit other animals  Yes, has scratched people  
 No, has shown no aggression towards animals or people  
 Other: \_\_\_\_\_

### Medical History

**Did this pet receive annual exam by a Veterinarian?**  Yes  No  Unsure

**Name of Veterinarian:** \_\_\_\_\_

**Is this cat current on his/her rabies vaccination?**  Yes  No  Unsure

**Does this animal have any medical problems or previous injuries that require special attention or a special diet?**

**Explain:** \_\_\_\_\_

**Please check all conditions that your cat has been diagnosed with or has been treated for:**

Allergies  Urinary Tract Infection  Upper Respiratory Infection  Epilepsy/Seizures  
 Thyroid Disease  Skin Problems  Ringworm  Diabetes  Organ Failure  
 Heart murmur  FIV  Feline Leukemia (FeLV)  Obesity  
 Other: \_\_\_\_\_

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## Diet

**What brand of food did this cat eat?**

- Premium brand (Science Diet, Eukanuba)    Grocery store brand (9-lives, Friskies)    Generic brand (Sam's brand, Dollar Store)    Home cooked diet    Prescription Diet – which one? \_\_\_\_\_

**Which of the following does your cat eat?**  Dry food only    Canned food only    Combination of dry/canned  
 Table scraps    Home cooked diet    Other: \_\_\_\_\_

**Do you feed your cat treats?**  No    Yes What kind? \_\_\_\_\_

**How often was this cat fed?**  Once daily    Twice daily    Food always available    Other: \_\_\_\_\_

## Litter Box Habits

*Often a change in environment (family move, new pet or baby, change of litter type) can cause a cat to use the litter box inconsistently. Please give us as much detail as possible regarding your cat's litter box habits. Sometimes litter box issues are the signs of health or behavioral problems that may be modified or eliminated with treatment from your veterinarian.*

**Did your cat have access to a litter box in the house?**  No    Yes – if yes, how many? \_\_\_\_\_

**If yes, did your cat use the litterbox?**  Yes, consistently (if yes, please skip to next page)  
 No    Sometimes

**If sometimes, how often did the cat make a mistake?** \_\_\_\_\_

**If no or sometimes, when was the most recent litter box accident?**

- Within the last week    Within the last few months    Six months ago  
 Six or more months ago    Has only happened a couple of times

**If no or sometimes, when did the accidents begin?**

- Recently    In the past month    In the past year    Ongoing issues

**Please describe the accidents:**  Urinates outside of the box    Urinates on clothing/furniture  
 Urine marks in the house    Defecates outside of the box    All of the above  
 Other: \_\_\_\_\_

**If the cat urinates or defecates outside of the box, does the cat most often go right beside the box?**  No    Yes, please describe : \_\_\_\_\_

**Can you pinpoint an event (a move, new pet, change of litter style, new baby, traveling and not home much, etc.) that may have influenced/triggered poor litter box habits?**

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**Please describe what measures you have taken to attempt to correct this problem.** \_\_\_\_\_

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**Has your cat been examined by a veterinarian for his/her litter box issues to rule out any medical problems contributing to the cat not using the litter box?**  No    Yes

**If yes, what was the diagnosis/outcome?** \_\_\_\_\_

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**How often did you scoop the litter box?**  Daily  Every few days  Weekly  Rarely

**What type of litter was used?**  Scented  Unscented  Clumping  Non-clumping  Crystals

Clay  Yesterday's News  Pine  Alfalfa  Other: \_\_\_\_\_

### **Personality Profile**

**Were there other animals in your home?**  No  Cat(s)  Dog(s)  Small Mammals  Birds  Other: \_\_\_\_\_

**If other cats, how many shared a litter box?**  One  Two or more  Many cats shared

**Where does the cat sleep?**  Wherever it wants  Cat bed  in bed w/ adults  in bed w/ children  Other \_\_\_\_\_

**Does the cat have any fears? (thunder, vacuum, etc?)** \_\_\_\_\_

**List any favorite toys:** \_\_\_\_\_

### **Does the cat have any of the following behaviors?**

Claws furniture  Uses a scratching post  Roams  Claws carpet  Digs in plants  
 Chews plants  Kills rodents  Kills birds  Dumps trash  Does not like to be picked up

### **How would you describe this cat?**

Shy  Friendly  Demanding  Easygoing  Quiet  Fickle  Finicky  Outgoing  One-person cat  
 Loving  Other: \_\_\_\_\_

**Has this cat regularly been around children?**  Yes  No  Not Sure

**If yes, please indicate the age range of children:**  0-2 yrs old  2-5 yrs old  6-10 yrs old  11-18 yrs old

### **How does this cat behave around children? (check all that apply)**

Friendly  Playful  Calm  Avoids certain children in family  Likes kids  
 Doesn't like kids  Easy for play to get out of control  Tolerates rough play from kids  
 Does not tolerate rough play from kids  Other: \_\_\_\_\_

### **How does this cat behave around adults? (check all that apply)**

Friendly  Playful  Calm  Avoids certain adults  Easy for play to get out of control  
 Other: \_\_\_\_\_

### **Describe how this cat behaves when people come to visit: (check all that apply)**

Quiet  Friendly  Jumps up on them  Hides and stays hidden  Hisses or growls  
 Hides but then comes out after a while  Starts out unsure, then gradually warms up and is friendly

### **How does this cat behave around other cats? (check all that apply)**

Never been around other cats  Friendly, no fighting  Fight over certain situations or possessions  
 Didn't really care, avoided other cats  Did not get along at all, constantly fought  
 This cat picked on other cats  Other cats picked on this cat

### **How does this cat behave around dogs? (check all that apply)**

Never been around dogs  Friendly, no fighting  Fight over certain situations or possessions  
 Didn't really care, avoided one another  Did not get along at all, constantly fought  
 This cat picked on dogs  Dogs picked on this cat

**Additional Comments:** \_\_\_\_\_