

FELINE SURRENDER PROFILE

Cat's Name _____

Age _____ Sex _____

Spayed/Neutered? Yes/No

De-clawed? Yes/No

Where did you acquire the cat? _____

How old was the cat when you acquired him/her? _____

How long has this cat lived with you? _____

Has your cat visited a veterinarian? _____ If so, who is your veterinarian? _____

Why are you surrendering your cat? _____

What other rehoming options have you tried before bringing your cat to HCAS

PERSONALITY

Check all that apply to describe your cat's personality:

friendly shy independent fearful playful affectionate aloof aggressive vocal

Describe your cat's personality in your own words.

TIME

Where does the cat spend most of his/her time? Inside Outside Inside/Outside

When inside, where does your cat spend most of the time?

If your cat goes outside, does he/she: stay close to the house wander off fight with other cats

PEOPLE

Does your cat like to sit on your lap? yes no

Does your cat like to be petted? yes no

What does he/she do when he/she has had enough petting? _____

Does your cat like being picked up? yes no

What does he/she do if he/she doesn't want to be picked up? _____

Is your cat afraid of, or uncomfortable with: women men children infants none

What does he/she do when uncomfortable? run away hiss swat at scratch bite

Does your cat show aggression towards: family members visitors

If yes, what does he/she do: hiss swat at scratch bite

What do you do if your cat becomes aggressive? _____

OTHER ANIMALS

What other animals has your cat lived with? Dogs Cats Other _____

How did your cat interact with the other cat(s)? Playful Tolerant Avoidance Aggressive Fearful

How did your cat interact with the dog(s)? Playful Tolerant Avoidance Aggressive Fearful



FELINE SURRENDER PROFILE CONTINUED

LITTERBOX

What type of litterbox do you have? Uncovered ____ Covered ____ Other _____

How many boxes did you have? _____ Where were they located? _____

What type of litter do you use? Clay ____ Clumping ____ Shavings ____ Other _____

Does your cat ever eliminate outside the litterbox? yes ____ no ____ Urinate ____ Defecate ____ Both ____

How frequently? daily ____ weekly ____ once in a while ____

Where does he/she eliminate if not in the box? _____

How long has your cat been inappropriately eliminating outside the litter box? _____

If urinating outside the box is he/she spraying (urine found on vertical surfaces)? Yes ____ No ____

What have you tried to help the inappropriate elimination?

MEDS/FOOD

Does your cat have any medical problems? No ____ Yes ____ Describe: _____

Is your cat currently on any medications or special diets? No ____ Yes (what) _____

Feeding: Dry food: once daily ____ twice daily ____ free feed ____ never ____

Canned food: once daily ____ twice daily ____ free feed ____ never ____

PLAY

Does your cat like to play? yes ____ no ____ If so, what is his/her favorite game/ toy?

What is your cat's best quality? _____

What is your cat's worse quality? _____

Thank you for answering these questions honestly. Everything you have told us about your cat is important to aid us in finding him/her an appropriate home.

Owner Contact Information:

Name: _____

Address: _____

Contact Number: _____

Email: _____

Best way and best time to contact you: _____

Pictures of animal provided Yes No



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