

# MY CAT'S MEOW



Changing lives... four paws at a time!

PLEASE CHECK ALL THAT APPLY ON EACH QUESTION. This Information is essential in finding a new home for your cat. AVHS will share this form with potential new adopters.

## BASIC INFORMATION

Today's Date: \_\_\_\_\_

Cat's Name: \_\_\_\_\_

Any Nicknames: \_\_\_\_\_

Cat's Current Age: \_\_\_\_\_

Cat's Age When You Got It: \_\_\_\_\_

Is this Cat Declawed?  Yes  No Is this Cat:  Male  Female  Neutered  Spayed

Why are you giving up your cat?

- Did not want it to begin with
- Behavior Issues
- On the recommendation of: \_\_\_\_\_
- Not getting along with my other pets (please list): \_\_\_\_\_
- Other: \_\_\_\_\_

How did you obtain this cat?

- Friend, neighbor, or family member
- Free from a newspaper ad
- Free at a local store
- Pet store
- Breeder
- Born at home
- Stray
- Gift
- Adopted from (shelter, rescue, etc.): \_\_\_\_\_

Why did you get this cat?

- Companion for:  Myself  Another family member  Another pet
- Protection for:  Home  Business  Another family member got the Cat
- Unwanted gift  Hunting Cat  Working Cat  Other: \_\_\_\_\_

What other animals was this Cat raised with in the household?

List the animals  
\_\_\_\_\_  
\_\_\_\_\_

Was this Cat raised with children?  Yes  No If yes, circle which ages: 0-6 7-9 10-12 13-16 17+  
How many children? \_\_\_\_\_

## HOUSING INFORMATION

Where does this cat spend its time?

- Inside only  Outside only
- Inside and outside
- When is this cat inside? \_\_\_\_\_
- When is this cat outside? \_\_\_\_\_
- Outbuilding (garage, barn, shed, etc.): \_\_\_\_\_
- Semi-outdoors (screened cat room, fenced cat area, etc.): \_\_\_\_\_
- Outside on a cat lead and/or harness:  Supervised  Unsupervised
- Other: \_\_\_\_\_

If this cat goes outside, how does it get out?

- Cat door  Window  Person lets it out  Other: \_\_\_\_\_

Is this cat restricted to/from any areas?

- Yes  No
- Please explain: \_\_\_\_\_

Where does this cat sleep at night?

- Inside:      Where? \_\_\_\_\_ On what? \_\_\_\_\_ With whom? \_\_\_\_\_  
 Outside:      Where? \_\_\_\_\_ On what? \_\_\_\_\_ With whom? \_\_\_\_\_

Does this cat have any favorite daytime perching spots? \_\_\_\_\_

Was this cat's housing arrangement successful?       Yes     No

If no, please explain: \_\_\_\_\_

### **FEEDING INFORMATION**

What type of food does this cat eat?

- Canned cat food      Brand: \_\_\_\_\_  
 Dry cat food      Brand: \_\_\_\_\_  
 Dry mixed with canned      Brands: \_\_\_\_\_  
 Special diet: \_\_\_\_\_

How often / how much does this cat eat?

- Once daily      Amount: \_\_\_\_\_      Time fed: \_\_\_\_\_  
 Twice daily      Amount: \_\_\_\_\_      Time fed: \_\_\_\_\_  
 Free fed      Amount: \_\_\_\_\_      Time fed: \_\_\_\_\_

Does this cat have any favorite treats?     Yes     No    If yes, what: \_\_\_\_\_

Would you describe this cat as a "picky eater"?     Yes     No

If yes, please explain: \_\_\_\_\_

### **EXERCISE AND PLAY INFORMATION**

Does this cat use a scratching post?     Yes     No

What type of surface does this cat prefer to scratch on?

- Carpet     Upholstery     Cardboard     Sisal fiber     Wood     Other: \_\_\_\_\_

When scratching, what type of surfaces does the cat prefer?

- Horizontal/flat       Vertical/upright       Slanted/on an angle

Does this cat receive regular play time with people?

- Yes, daily play sessions     Yes, a few sessions per week     No regular play time

What type of items does this cat play with?

- Toy mice       String       Feathers       Balls  
 Live prey (bugs, birds, mice, etc.)       Other: \_\_\_\_\_

Does this cat play "ambush" games?     Yes     No

If yes, please explain: \_\_\_\_\_

What is this cat's play style?

- Gentle as a lamb     Middle of the road  
 Rough n' tumble     Not interested in play

What is this cat's activity level?

- Low energy     Middle of the road     Extremely active

When is this cat most active?

- Daytime     Nighttime     Both

Describe activities you did with this Cat:

- Petting                       Brushing                       Bathing                       Playing fetch     Playing tug-of-war  
 Playing chase               Rough housing               Running errands         Training games  
 Training classes             Road trips                       Quiet companionship  
 Other: \_\_\_\_\_

**BEHAVIORAL INFORMATION**

Does this cat give "love bites"?  Yes  No

If yes, what kind of bites are they?  Soft                       Medium                       Hard

Does this cat display any of the following "don't pet me right now" behaviors?

- Swishes tail                       Twitches ears                       Flattens ears                       Ripples back  
 Narrows eyes                       Other: \_\_\_\_\_

Does this cat have any areas it prefers not to be touched?

- Back                       Tail                       Feet                       Ears  
 Neck                       Face                       Abdomen                       Other: \_\_\_\_\_

Do you feel that this cat is territorial?  Yes  No

If yes, please explain: \_\_\_\_\_

Do you discipline this cat?  Yes  No

If you have disciplined this cat, what method(s) did you use?

- Verbal correction                       Physical correction                       Squirt bottle/water gun                       Timeout inside  
 Put it outside                       Throw something at the cat                       Ignore the behavior  
 Other: \_\_\_\_\_

What do you discipline the cat for?

- Litter box accidents                       Getting onto counters                       Scratching furniture  
 Scratching/biting people                       Eating plants                       Bothering other pets  
 Nighttime activity                       Other: \_\_\_\_\_

***How does this cat behave with:***

Family		Visitors to the Home	
Adults	Children	Adults	Children
<input type="checkbox"/> Friendly	<input type="checkbox"/> Friendly	<input type="checkbox"/> Friendly	<input type="checkbox"/> Friendly
<input type="checkbox"/> Playful	<input type="checkbox"/> Playful	<input type="checkbox"/> Playful	<input type="checkbox"/> Playful
<input type="checkbox"/> Plays gently	<input type="checkbox"/> Plays gently	<input type="checkbox"/> Plays gently	<input type="checkbox"/> Plays gently
<input type="checkbox"/> Plays rough	<input type="checkbox"/> Plays rough	<input type="checkbox"/> Plays rough	<input type="checkbox"/> Plays rough
<input type="checkbox"/> Cuddly	<input type="checkbox"/> Cuddly	<input type="checkbox"/> Cuddly	<input type="checkbox"/> Cuddly
<input type="checkbox"/> Vocal	<input type="checkbox"/> Vocal	<input type="checkbox"/> Vocal	<input type="checkbox"/> Vocal
<input type="checkbox"/> Destructive	<input type="checkbox"/> Destructive	<input type="checkbox"/> Destructive	<input type="checkbox"/> Destructive
<input type="checkbox"/> Shy	<input type="checkbox"/> Shy	<input type="checkbox"/> Shy	<input type="checkbox"/> Shy
<input type="checkbox"/> Fearful	<input type="checkbox"/> Fearful	<input type="checkbox"/> Fearful	<input type="checkbox"/> Fearful
<input type="checkbox"/> Aggressive	<input type="checkbox"/> Aggressive	<input type="checkbox"/> Aggressive	<input type="checkbox"/> Aggressive

Does this cat have a preference for:

- Men                       Women                       Children                       Animals: \_\_\_\_\_

How would you characterize this Cat overall? (Please check all that apply)

- Calm       Friendly       Playful       Curious       Vocal       Cuddly       Clingy  
 Standoffish       Outgoing       Shy       Confident       Dependent       Independent       Fearful  
 Aggressive       Other: \_\_\_\_\_

Please list any *additional* information on daily routines for feeding, playing, etc: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you enjoy most about this cat? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe the ideal home you would like for this cat:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please add any additional information that you feel would be helpful for us or a new owner to know about this cat (do not forget to include any past medical history and incidents even if it is no longer an issue): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the Cat have any medical history?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Who was the Cat's veterinarian? \_\_\_\_\_ Phone: \_\_\_\_\_

Would you like us to provide your name and phone number? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

May we and/or the new owner(s) contact the vet to obtain health information?

Yes     No      **If yes, please initial here:** \_\_\_\_\_

May the new owner(s) of this Cat contact you for further information?     Yes     No

Contact Information: \_\_\_\_\_