## Pet Selection Counseling Questionnaire

| Name: |  | Email: |  |
| :--- | :--- | :--- | :--- |
| Address: |  | Phone: |  |
|  |  |  |  |

## Part 1: Household Composition

Please list people that will live with or interact with the pet routinely. Include name, age, and relationship:

List current household pets including name, age, sex, species/breed:

List any previous pets you have had including name, species/breed, and reason the pet is no longer in the home:

## Part 2: Household Logistics and Dynamics

Is anyone in the home allergic to animals?YesNo

Does anyone in the family have special needs?YesNo
If yes, please specify:
How often do adults visit the home?DailyNumerous times a week1-4 times a monthInfrequently

How often do children or teens visit?DailyNumerous times a week1-4 times a monthInfrequently

How would you describe your current lifestyle?Very hecticModerately busy/controllableCalm/Quiet

Are there any major family changes in the near future?YesNo If yes, please specify:

## FEAR FREE LEVEL 3 CERTICATION COURSE

## FEAR FRIE <br> Taking the pet out of petrified.

You live (mark all that apply) $\square$ in a house $\square$ in an apartment or condominium $\square$ in a high-rise $\square$ on a farmin an urban settingin a rural settingin a suburban setting

What is your approximate yard size?Large (acre or more)MediumSmallNo yard What type of fencing is around the yard?

## Part 3: Management and Responsibilities

How will your pet be managed in the backyard?

Where will your pet spend most of his time?

What will your pet's indoor areas include?

Where will your pet sleep?

How long will your pet be left alone during the day (typical work day)?

Where will you pet be kept when you are not home?

How much time do you plan on interacting with your pet daily? (training, playing, exercise, grooming, etc.)?

How often do you travel?

What will you do with your pet when you travel?

Who will be responsible for feeding?

Who will be responsible for cleaning up after the pet?

## FEAR FREE LEVEL 3 CERTICATION COURSE

## FEAR FRIE <br> Taking the pet out of petrified.

Who will be responsible for administering medications?

How often do you plan to walk your pet?

Who will be responsible for walking?

How often do you plan to train your pet?

Who will be responsible for training?

Do you plan to attend private or group training classes?

Do you plan on crate training your pet?

## Part 4: Financial Considerations

How much are you willing to pay for your pet?

How much are you budgeting monthly for pet food?

Do you plan on spaying or neutering your pet?

How much are you budgeting annually on your pet's medical care?

## Part 5: Pet Characteristics

Which of the following pet sources are you considering to obtain a pet?Reputable breederAnimal shelter/human societyRescue groupOnline resourcePet store $\square$ Other

Are there other animals besides your current pets that you anticipate your pet will need to interact with?

## FEAR FREE LEVEL 3 CERTICATION COURSE

## FEAR FREE <br> Taking the pet out of petrified.

How often do you plan to groom your pet yourself?

Do you plan to have your pet professionally groomed?

How important is it to you that your pet "guards your home"? $\square$ Very important $\square$ Important $\square$ Not important $\square$ Do not want a guard dog

How important is it to you that your pet wants to sit in your lap, follows you around? $\square$ Very important $\square$ ImportantNot importantI would rather have an independent pet

How much does hair on your clothing or furniture bother you? $\square$ Cannot tolerate $\square$ Can tolerate somewhatDoes not bother me

Your primary purpose for obtaining a pet:

What size pet do you prefer?

What age would you like the pet to be when you acquire it?

Prioritize 3 activities you would like to do with your pet:
1.
2.
3.

Breeds you are considering:
1.
2.
3.
4.
5.

Are you interested in training your pet?Yes, I look forward to trainingNo, I would like a pet that requires little training

## FEAR FREE LEVEL 3 CERTICATION COURSE

Potential pet behaviors and your tolerance for them:

| Behavior | Could live with the <br> behavior | Would do whatever <br> it takes to address <br> the behavior | Behavior would <br> prompt me to part <br> with the pet |
| :--- | :--- | :--- | :--- |
| Housetraining problems |  |  |  |
| Shyness with people |  |  |  |
| Aloofness with family |  |  |  |
| Excitability |  |  |  |
| Demands attention |  |  |  |
| Jumps on people |  |  |  |
| Digging/yard destruction |  |  |  |
| Chewing/destructive |  |  |  |
| Excessive vocalization |  |  |  |

What has prompted you to seek a pet at this time?

List any questions or concerns:

