

Jill A. Goldman, Ph.D., M.Sc. CAAB
DJG Animal Behavior Services



PO Box 15184, Beverly Hills, CA 90209
www.DrJillGoldman.com

Animal Behavior History Questionnaire

Client Name: _____

Animal Name: _____

Species/Sex/Age: _____

Veterinarian: _____

From where did you obtain this animal? When? Why?

Rate your level of experience of guardianship: Novice ____ Moderate ____ High ____

Describe the animal's personality:

Date of last veterinarian exam: _____

List all major surgical or medical problems and approximate dates:

List all medications (including dosage and schedule) currently being taken by this animal:

Diet:

_____ % Dry (Brand _____) _____ % Wet (Brand: _____)

Supplements: _____

How many times a day is the animal fed? _____ By whom? _____

When? _____ Location: _____

Does the animal finish his/her meal(s)? _____ % Leftover _____

Describe feeding habits: poor eater, picky, normal appetite, voracious

What is your animal's favorite treat(s)? _____

When are treats delivered? _____

Activity:

At what time of the day is the animal most active?

Is this animal left alone during the day? _____ How long? _____

What amount of exercise or opportunity to exercise is given to the animal (hours/day/week)?

What toys/types of play does the animal enjoy? How often?

Environment/Lifestyle: Briefly describe physical living conditions including favorite resting/sleeping area(s):

Who is in-charge of animal (including daily schedule, sex, and age if under 18):

1. M/F Age _____ Schedule
2. M/F Age _____ Schedule
3. M/F Age _____ Schedule
4. M/F Age _____ Schedule
5. M/F Age _____ Schedule
6. M/F Age _____ Schedule

Does this animal live with other animals?

Name	Species	Breed	Sex	Age Now	Age when obtained	Order obtained
------	---------	-------	-----	---------	-------------------	----------------

Does this animal get along with other animals? Y[] N[] Please explain:

How does this animal react to unfamiliar people?

Training:

Has this animal had any formal obedience training? Y[] N[]

What will the animal do on command?

The animal's ability to learn is fast/slow/easily distracted, other_____

Punishment

Have you used any of the correction techniques: (Circle the number of the most effective punishment)

Physical (hitting)	Y N	Success: High/Med/Low/None
Noise (Shaker can/siren)	Y N	Success: High/Med/Low/None
Ultrasonic (Petagree)	Y N	Success: High/Med/Low/None
Water spray	Y N	Success: High/Med/Low/None
Verbal/shouting	Y N	Success: High/Med/Low/None
Time Out	Y N	Success: High/Med/Low/None
E-Collar	Y N	Success: High/Med/Low/None
Citronella collar	Y N	Success: High/Med/Low/None
Other:_____		Success: High/Med/Low/No

Has any punishment made the problem worse or caused aggression? Does the animal react differently to punishment from different people?

Behavior:

Please describe the animal's behavior problem(s): The severity is: mild moderate severe other

How many times has the problem occurred a) past week ____ b) past month ____ c) past year ____

What age was the animal when this problem started? _____ Month and year? _____

Describe the first incident? Describe the situations(s) in which the problem is most likely to occur?

What has been done so far, to correct the problem (discipline, crate, etc)? What techniques have been successful or made problems worse:

List all medications (dosage, schedule & duration) that has been prescribed for a behavior problem and the results:

Have you considered euthanasia? Y. N. Comment:

Describe any situations where your animal is shy, timid, or fearful:

How does the animal react when frightened? Cower, retreat, aggression, other

Please describe all situations that are likely to elicit aggressive behavior: Describe at least the last two aggressive incidents in detail (including date, time of day, and context).

Please indicate any other behavior problems:

House soils	Shy	Play	Other
Destructive chewing	Eats stool	Jumps up	
Feeding	Pacing	Unruly	
Sexual	Aggressive	Bites	
Grooming	Barking	Fights	
Digging	Learning	Runs away	
Swallows nonfood items	Sleep	Destructive scratching/ digging	

Please discuss in detail any other information you feel is relevant to your animal's problem(s):