

STOLA

Saluki Tree of Life Alliance, Inc.

3701 Sacramento Street #345
San Francisco, CA 94118-1705
E-mail: stola@gazehound.com



Please complete this form and return the original to your Regional Coordinator. You may retain a copy for your records if desired.

SALUKI PERSONALITY PROFILE

For office use only. Code Number:

In an effort to help us place your pet in an environment best suited to its needs, we ask that you complete this questionnaire as completely and honestly as possible. Your identity and that of the dog will remain confidential unless you specify to the contrary. The dog will be assigned a code number to maintain confidentiality.

Name of Dog:

Age:

Sex: Altered:

Color/Markings:

Smooth: Feathered:

Tattoo: Microchip: AKC Reg. #:

Vaccinations and Heartworm Medication (please give dates):

Vaccine/Medication	Date Given	Date Due
Rabies		
Lyme		
DHLPP		
Corona		
Bordatella		
Heartworm Med.		

Is this dog crate trained? Yes () No ()

Is the dog primarily a: house dog yard dog both

Is the dog housebroken? Yes () No ()

If not, why?

Can the dog be trusted to stay by itself in the house for extended periods of time? Yes () No ()

If not, why?

Can the dog be trusted to stay by itself in a fenced yard? Yes () No ()

If not, why not?

How long have you owned this dog?

Has this dog always lived with you? Yes () No ()

If no, give brief history:

Does the dog dig to get out of the yard? Yes () No ()

If yes, to be with you or to run away?

Does the dog jump fences? Yes () No ()

If yes, how high?

Has the dog been kept on a chain? Yes () No ()

If so, why?

Where does the dog sleep?

When is the dog normally fed?

What brand of food does the dog eat?

Amount of food at each feeding?

Does the dog eat any "people foods?" If so, what?

Was the Saluki obtained from (please circle):

Friend Pet Shop Gift Stray Abandoned

Animal Shelter Breeder Other:

Has the dog ever bitten anyone? Yes () No ()

If yes, when and why?

Does the dog have any particular fears? (e.g. thunder, vacuum, garbage truck, etc.)

Does the dog:

Tear furniture	Yes ()	No ()	Sometimes ()
Tear carpets	Yes ()	No ()	Sometimes ()
Dump trash	Yes ()	No ()	Sometimes ()
Bark/howl a lot	Yes ()	No ()	Sometimes ()
Roam	Yes ()	No ()	Sometimes ()
Dig holes in the yard	Yes ()	No ()	Sometimes ()
Chase cars	Yes ()	No ()	Sometimes ()
React negatively to uniforms	Yes ()	No ()	Sometimes ()
Walk on leash	Yes ()	No ()	Sometimes ()
Ride well in a car	Yes ()	No ()	Sometimes ()
Chew inappropriate objects	Yes ()	No ()	Sometimes ()
Play with his own toys	Yes ()	No ()	Sometimes ()
Like to be with new people	Yes ()	No ()	Sometimes ()
Like children	Yes ()	No ()	Sometimes ()
Like women	Yes ()	No ()	Sometimes ()
Like men	Yes ()	No ()	Sometimes ()
Like other dogs	Yes ()	No ()	Sometimes ()
Like cats	Yes ()	No ()	Sometimes ()
Come when called by name	Yes ()	No ()	Sometimes ()

Bite or snap at people Yes () No () Sometimes ()

Describe this dog with people: (circle all that apply)

one person pet	shy	friendly	destructive
noisy	active	protective	obedient
playful	easygoing	quiet	aggressive

Are there any special problems that we should understand concerning this dog?

Are there any comments you would like to make?

STOLA Contact Information for this transaction:

Region:

Regional Coordinator:

Allied Club or Organization (if applicable):

Address:

Phone:

Email:

STOLA Volunteer:

Volunteer's Address:

Volunteer's Phone:

Volunteer's Email:

Volunteer's Signature: