



# Canine Surrender Request

Please complete all shaded areas. Incomplete forms may not be processed.

<b>Name:</b>	<b>Date:</b>
<b>Address:</b>	<b>City/State/ZIP:</b>
<b>Home Phone:</b>	<b>Mobile:</b>
<b>Email:</b>	

<b>Dog's Name:</b>	<b>Age or Date of Birth:</b>
<b>Sex:</b> <input type="checkbox"/> Spayed Female <input type="checkbox"/> Neutered Male <input type="checkbox"/> Un-spayed Female <input type="checkbox"/> Un-neutered Male	<b>Breed/Description:</b>
<b>Reason for Surrender:</b>	<b>When did you get the dog:</b>
<b>Dog currently lives:</b> <input type="checkbox"/> Inside <input type="checkbox"/> Outside <input type="checkbox"/> Both	<b>How did you get the dog:</b> <input type="checkbox"/> Adopted from JPR <input type="checkbox"/> Adopted from Shelter/Rescue <input type="checkbox"/> Gift from Friend/Family <input type="checkbox"/> Purchased from Store/Breeder <input type="checkbox"/> Stray (Date Found: _____ )
<b>If surrendering a litter of puppies, would you like low-cost spay/neuter information:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Medical Information	
<b>Does the dog have a primary care vet:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<b>Do you have records:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Name of vet or clinic:</b> <b>Phone Number:</b>	<b>Describe any medical conditions:</b>
<b>Current on rabies vaccine:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Date:</b> <input type="checkbox"/> Tags Present <input type="checkbox"/> No Tags	<b>Current on distemper vaccine:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Date:</b>
<b>Current on kennel cough vaccine:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Date:</b>	<b>Current on flea preventative:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Date Last Given:</b>
<b>Current on heartworm preventative:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Date Last Given:</b>	<b>Tested for Heartworm:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Date:</b> <input type="checkbox"/> Positive <input type="checkbox"/> Negative
<b>PUPPIES: Dewormed:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No Rd 1 Date:      Rd 2 Date:	<b>PUPPIES: Tested for Parvo:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Date:</b>
<b>PUPPIES: Boosters:</b> Rd 1 Date:      Rd 2 Date:      Rd 3 Date:	

Personality & Temperament Information	
<b>Good with children:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<b>Crate trained:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
<b>Good with other dogs:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<b>Leash trained:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
<b>Good with cats:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<b>House broken:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
<b>Jump over fence:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<b>Toy or food aggressive:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
<b>Dig under fence:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<b>Ever bitten anyone:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown

<b>Anything else the new owners should know:</b>
<b>Describe the ideal home for the dog:</b>
<b>Items donated with the dog:</b>

**By signing here, I am attesting to the truthfulness of my answers:**

**Signature:**

**Donation Amount:**

If you are surrendering multiple dogs please complete a separate form and send a separate picture for each dog.  
**Next Step:** Email the completed form and a recent picture to [JPR@jenniferspetrescue.com](mailto:JPR@jenniferspetrescue.com).