Amarillo SPCA
PRESCREENING QUESTIONNAIRE – page 1 of 2

Name: _____

Age: _____

Address: _____

City, State, Zip _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

SPCA Tag #: _____

MICROCHIP #: _____

SPCA Animal: Dog Cat

Name: _____
Breed: _____
Age: _____
Sex: Male Female
Sterilized: Yes No

Please complete the following questionnaire (front and back)

1. What is the primary reason you are interested in this particular animal:

_____

2. Will this pet be a member of your family or a gift for someone else?
   If for someone else, who:
   (List name, full address, age, & phone #)

_____

3. Who will be the primary caretaker of this pet?

_____

4. Have you ever adopted or owned a pet before? YES NO
   If YES, do you still have the pet? YES NO If NO, what happened to it? _____
   Have you had any pets that have died (or had to be euthanized) in the past 2 years? YES NO
   If YES, what was the reason?

_____

5. Do you have any pet(s) now? YES NO

Type of animal	Sex & Age	How long have you had it?	Indoor or Outdoor pet?	Spayed or Neutered?	Current Vet City/State

If a CAT, has your cat been tested for FIV (feline AIDS) or FILV (feline Leukemia)? YES NO
If a DOG, has your dog had a rabies vaccination? YES NO
If YES: when and what vet?

6. Do you live in the city, country, etc?

7. Do you live in a home, mobile home, condominium, apartment, motor home, trailer, or other? _____
   Do you own or rent? If renting, does landlord allow animals?

8. Do any handicapped people live in your household? YES NO If YES: Age of person:
   Any special equipment used by them? (ex: wheelchair, walker, etc.)