



PET ALLIANCE
of Greater Orlando

SHELTER INTAKE FORM - CAT

Requirements at Intake:

- ✓ Valid ID or owner surrender form plus copy of owners ID.
- ✓ Medical records including rabies certificate.
- ✓ Completed profile to assist adopters with selecting a new pet.

GENERAL INFORMATION

1. Cat's Name: _____
2. Age (birthday if known): _____
3. Sex: Female Male Spayed/Neutered: Yes No Unknown
4. Where did you acquire your cat? _____
5. How long have you had your cat? _____
6. What issues are you having with keeping your cat?
 Pet's Behavior Pet's Health Owner's Health Finances Housing Family

MEDICAL & DIETARY INFORMATION

1. When was the last time your cat was seen by a veterinarian? _____
2. Name of clinic: _____ Phone Number: _____
3. Cat's current medications: _____
4. Describe any past or present health problems or injuries: _____

5. List any allergies your cat may have: _____
6. Food and schedule: Dry Canned Table Scraps Prescription Other _____
 Free fed Feeding Schedule: _____ Brand(s): _____
 Favorite treats : _____

PERSONALITY PROFILE

1. What is your cat's personality like?
 Cuddly Affectionate Mouthy Curious Energetic/Active Jumpy
 Playful Independent Goofy Talkative Calm/Gentle Outgoing
 Shy Couch Potato Fearful Other _____
2. What does your cat like to play with:
 Balls Cat nip Mice Crinkle Cat wands Laser pointer Boxes Bags Water Other cats
 Dogs His/her tail Things I can't see Other _____
3. What activities does your cat enjoy?
 Climbing cat towers/shelves Sleeping Snuggling Hiding Running Wrestling Swimming
 Observe nature Sunbathing Cat scratcher Fetch Other _____

HOME ENVIRONMENT AND BEHAVIOR

1. Including yourself, indicate the ages of people your cat has lived or interacted with:

- Seniors Adults Children under 5 years Children 6-12 years Children 13-17 years

2. How does your cat react to children:

- Friendly/Playful Avoids Fearful Unpredictable Roughhouses
 Calm/Easygoing Snappy Swats Growls/Hisses Never been around

3. Please indicate which animals your cat is compatible with:

- Dogs (*circle all that apply*) Male / Female / Small / Large / Puppy / Adult / Senior
 Cats (*circle all that apply*) Male / Female / Kitten / Adult / Senior Other _____

4. How does your cat behave around other animal(s):

- Friendly/Playful Tolerates Cautious Easygoing Fearful Grooms
 Growls/Hisses Snappy Roughhouses Chases Avoids Swats
 Unpredictable Respectful Resource guards with (*circle all that apply*) Food / Toys / Treats

5. Describe your cat's behavior when:

- Bathed** Calm Excited Fearful Does not allow Other _____
Nails trimmed Calm Excited Fearful Does not allow Other _____
Picked up Calm Excited Fearful Does not allow Other _____
Handled by vet Calm Excited Fearful Does not allow Other _____

6. Does your cat display any of the following behaviors?

- Scratches inappropriate things Sprays Vocalizes Escapes Plays rough Chews wires Hides
 Other _____

7. Does your cat use the litterbox all the time? Yes No, explain _____

8. Type of litter: Clumping clay Non-clumping clay Pellet Crystal Other _____

9. Type of litterbox: Covered Open Automatic Other _____

10. Where does your cat:

- Live** Inside home Inside garage Outside free roaming Outside fenced area
Sleep On furniture Outside Warm place Cat bed On people On other pet In hidden area

11. Is your cat frightened of anything?

- Men Women Children Strangers Vet/Groomers Fireworks Thunder Vacuum Carriers
 Bikes/Skateboards Cars Loud voices/Yelling Being left alone Other _____

12. Has your cat ever scratched or bitten a person or animal? No Yes, give details _____

13. Please describe any body parts your cat does not like being touched and what is the reaction: _____