



MOBILE SPCA FELINE PURRSONALITY PROFILE

Mobile SPCA
620 Zeigler Circle West • Mobile, 36608
251-633-3531 • spca@MobileSPCA.org

Date _____

Pet's Name _____

Contact Person _____

Address _____

City _____ State _____ Zip _____ Cell Phone _____

Work Phone _____ Home Phone _____

E-mail _____

Has this cat ever bitten anyone? YES NO If yes, please call the Mobile SPCA office at 633-3531 before continuing.

DESCRIPTION:

Color _____ Markings _____

Mix: YES NO Sex: MALE FEMALE

Altered: YES NO UNSURE Litter trained: YES NO UNSURE

Declawed: YES NO Hair length: LONG MED SHORT

What type of food are you feeding this cat? _____

How often does he eat? _____ Snacks? _____

MEDICAL:

Vaccinations Current: YES NO UNSURE Feluk tested: NEG POS UNSURE

Rabies Vaccination: YES NO UNSURE

Fleas preventative? YES NO Date of last dose: _____

Does this cat have any health problems? _____

Veterinarian's Name _____ Phone _____

Date of last veterinary visit _____

Reason for placing cat in a new home? _____

GENERAL INFORMATION:

How old is this cat? _____ How long have you had him? _____ Where did you get him originally? _____

Nicknames? _____ Does he live inside outside both

Does he use the litterbox? _____ What type of litter do you use? _____

HOUSEHOLD INFORMATION:

Who (number) is in the household? _____ cats? _____ dogs? _____ What sexes and ages? _____

How is this cat with any of these pets? ignores them? plays with? bossy with? grouchy with?

Are there children in the household? yes no how many? _____ What ages are the children? _____

Does the cat tolerate them? ignore them? Walk away if they get too close?

Does it seem she would like to play with them / be with kids forever? _____

PLEASE BE HONEST, WHAT MAY BE A PROBLEM FOR YOU, MAY NOT BE FOR ANOTHER FAMILY.

HABITS WITH VISITORS AND HABITS ABOUT HIMSELF:

Does this cat:

- Use a Scratching post
- Chew or dig plants
- Claw at furniture
- Jumps on counters
- Try to run out the door
- Like to be bathed
- Like to be brushed
- Like to be picked up

Mark those which best describe your pet:

- Aloof
 - Friendly
 - Destructive
 - Easy Going
 - Shy
 - Aggressive
 - Lap cat
 - Quiet
 - Vocal
 - Outgoing
 - Nervous
 - Independent
 - Loving
 - Playful
 - Active
- Has he ever slapped anyone? YES NO UNSURE

What parts of his body does this cat NOT like to be touched or handled? _____

What has the cat done to show you he doesn't like being handled? _____

Is he better or worse with particular people / children in the household? _____

Does he have any fears? Strangers Thunder Vacuum Baths Men Women Children

HELPFUL INFORMATION FOR THE NEXT OWNERS:

What are this cat's best qualities? _____

Who does this cat like the best in the household? _____

Why? _____

What are his favorite toys? _____

If you could change one of his bad habits, what would it be? _____

What are some of the cutest and nicest things about this cat? _____

What worries you most about placing this cat in a new home? _____

PLEASE CHECK THE STATEMENT THAT BEST DESCRIBES YOUR OWNERSHIP STATUS

- As the **OWNER OF THIS PET**, I have truthfully answered all of the questions regarding this pet to the best of my knowledge.
- I **RESCUED THIS PET** and know little of its past history but I have truthfully answered all of the questions regarding this pet to the best of my knowledge.

Signed _____

OFFICE USE ONLY:

Date of listing _____ SPCA Representative _____

Referrals / Follow-Up _____

Placement _____