Cat Owner Questionnaire

No one knows and loves your cat the way you do! To help us find the best home for your cat, please provide as much detail as possible about history, past veterinary care, likes, dislikes, and unique traits of your feline friend. Behavioral and medical issues do not necessarily create problems, but failing to disclose them certainly does.

Has your cat bitten in the last ten (10) days?  ☐ Yes  ☐ No

General Information

Shelter Arrival Date ____________________________

Cat’s Name ____________________  Cat’s age or approximate age __________________

Cat’s Sex  ☐ Male  ☐ Female  ☐ Unsure

Is cat spayed/neutered?  ☐ Yes  ☐ No  ☐ Unsure

What kind of I.D. does your cat have?  ☐ Tattoo (If so, where is it located)  ☐ Microchip

Is the cat declawed?  ☐ Front  ☐ All  ☐ Not declawed

If declawed, when was it done?  ☐ As a kitten  ☐ As an adult

History

Why are you surrendering your cat? ____________________________________________

If surrender reason is behavioral, please explain. __________________________________

If we could help you resolve this issue would you be interested in keeping your cat? ____________________________

How long have you owned your cat? ____________________________

Including yours, how many homes has this cat had? ____________________________

Where did you acquire this cat?

☐ Found as a stray  ☐ Born in my home  ☐ From APF  ☐ News/online ad

☐ Pet store  ☐ Another shelter  ☐ Friend/relative  ☐ Breeder

☐ Other __________________________________________

Medical History

Did your cat see a veterinarian regularly?  ☐ Yes  ☐ No  ☐ Not sure

If so, which vet hospital? ____________________________________________

Is your cat current on vaccinations?  ☐ Yes  ☐ No  ☐ Not sure

Has your cat ever had surgery?  ☐ Yes  ☐ No  ☐ Not sure

If yes, please explain. ____________________________________________

Has the cat been diagnosed with and/or treated for any of the following: (check all that apply)

☐ Upper respiratory infection  ☐ Allergies  ☐ Heart murmur  ☐ Tumors

☐ Epilepsy or seizures  ☐ Organ failure  ☐ Thyroid disease  ☐ Diabetes

☐ Urinary tract infection  ☐ Other (please explain) ____________________________________________

Personality

How would you describe your cat most of the time? (check all that apply)

☐ Friendly to family  ☐ High energy  ☐ Gentle

☐ Friendly to visitors  ☐ Playful/active  ☐ Relaxed/mellow

☐ Shy to family  ☐ Talkative  ☐ Lap cat

☐ Shy to visitors  ☐ Quiet  ☐ Independent

☐ Affectionate  ☐ Outgoing/social  ☐ More like a dog

☐ Busy/curious  ☐ Fearless  ☐ Enjoys being groomed
Play Style
How does your cat like to play? (check all that apply)
- Plays gently, does not usually use teeth or claws
- Likes to play rough, may bite or scratch
- Likes to chase & pounce with variety of toys
- Will fetch items like bottle caps or toys
- Likes to play in or around water
- Other _______________________

Lifestyle & Home Life
What areas of the home did your cat have access to? (check all that apply)
- Indoors only
- Outdoors only
- Indoors at night
- Garage or basement
- Indoors in cold weather
- In barn or shed
- Screened porch
- Outdoors in warm weather
- Indoors with access to outside
- Other _______________________

Where did your cat spend most of his or her time? (check all that apply)
- Bedroom
- Kitchen
- Living room
- Garage or basement
- At the window
- Outdoors only
- Barn or shed
- Where people are
- Other _______________________

If this cat has lived with other cats, how did they interact? (check all that apply)
- Adored each other
- Played together
- Sniffed noses
- Groomed each other
- Slept near each other
- Ignored each other
- Rough with others
- Fought with injuries
- Fought without injuries
- Cat feared dog
- Cat rubbed on dog
- Cat tormented dog
- Avoided each other
- Peacefully coexisted
- Other (please explain) ___________________________________________________________________

If this cat has lived with dogs, how did they interact? (check all that apply)
- Adored each other
- Played together
- Sniffed noses
- Groomed each other
- Slept near each other
- Ignored each other
- Cat feared dog
- Fought with injuries
- Cat rubbed on dog
- Cat tormented dog
- Avoided each other
- Peacefully coexisted
- Other (please explain) ___________________________________________________________________

Has the cat regularly been around children?  □ Yes  □ No  □ Unsure
If yes, indicate what ages:
- 0-2 yrs.
- 3-5 yrs.
- 6-10 yrs.
- 11-18 yrs.

If this cat lived with children under the age of 7, how did they interact? (check all that apply)
- Cat actively avoided child
- Child could pet cat
- Mutual adoration
- Ignored each other
- Cat & child played together
- Cat hissed or growled at child
- Other _______________________

Have the experiences with the cat and child(ren) always been positive?  □ Yes  □ No
If no, please explain: _____________________________________________________________________

Is this cat more comfortable with: □ Women □ Men □ Kids □ Teenagers □ Seniors □ Loves all people

How would you describe the ideal home for your cat?  _______________________________________
Please tell us some things you truly love about your cat. _______________________________________
Are there any habits you are not fond of in your cat? _______________________________________
Does your cat do any of the following? (check all that apply)
- Jump on counters
- Scratch furniture
- Chew plants
- Scratch doors/cabinets
- Chew personal items
- Climb curtains
- Other _______________________

How did you attempt to correct this? _____________________________________________________________________
Dietary Habits
What is the cat’s favorite brand of food? _______________________________________________________________
Which does your cat eat?  □ Dry only □ Canned only □ Combination of dry & canned □ People food
What type of treats does your cat enjoy? ______________________________________________________________
How often is your cat fed? □ Food always available □ Designated mealtimes

Litterbox Habits
We ask so many questions about litter box use because it is one of the main reasons cats are surrendered. Please help us by giving as much detailed information as possible. Sometimes a change in environment may be just what the cat needs, and sometimes there are more serious health or behavior issues involved.

Does your cat have access to a litter box in the house? □ Yes □ No
If no, did your cat use the bathroom outdoors? □ Yes □ No
How often does the cat make mistakes? _______________________________________________________________
Is the litter box: □ Covered □ Uncovered
Where is the litter box(s) located in the house? ________________________________________________________
Please describe the accidents: □ Urinates outside the box □ Urinates on clothing/furniture
□ Defecates outside the box □ Sprays on walls/furniture
□ All of the above □ Other
How often was litter box scooped? □ Every day □ Every few days □ Weekly □ Rarely
What type(s) of litter was used? □ Unscented □ Scented □ Clumping □ Non-Clumping
□ Crystals □ Clay □ Pine □ Yesterday’s News □ Other
Are there other animals in your home? □ No □ Other cats □ Dogs □ Birds □ Rodents
If other cats, how many shared a litter box? □ One □ Two or more □ Many cats shared
□ Multiple boxes for multiple cats
If litter box accidents were an issue, when did they begin? □ Past month □ Past year □ Ongoing
Can you pinpoint an event(s) that might have influenced or triggered inappropriate litter box use? __________________________
Please describe the measures you have taken to correct this problem. ____________________________________________
Has your cat been to the veterinarian to rule out infection or underlying health issues? □ Yes □ No
If yes, what was the outcome?
Please share any additional comments about your feline friend. __________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
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