

Chico Cat Coalition

www.chicocatcoalition.org

PO Box 4214
Chico, CA 95927

Cat Pre-Intake Questionnaire

(530)894-1365
mail@chicocatcoalition.org

Cat's Name _____ Date _____

Your Information

Name _____ Address _____

Phone _____ Email _____

Cat's Information

Sex _____ Spayed/Neutered? Yes No Unknown Birth Date _____

Breed/Description _____

Declawed? Front Paws All Paws No Microchipped? Yes No Unknown

If declawed, when? Kitten Adult Unknown

Cat's Health

Any medical issues, past or present? Please explain. _____

Up to date on vaccinations: FvRCP? Yes No Unknown Rabies? Yes No Unknown

Viral tested? Yes No Unknown FeLV? + - FIV + -

Your veterinarian _____ Phone _____

Do we have your permission to contact your vet about this cat? Yes No

Cat's Behavior

Any behavior issues, past or present? Please explain. _____

Any history of aggression toward people or animals? Please explain. _____

Has the cat ever bitten anyone? Yes No Unknown

Has the cat bitten anyone within the last 10 days? Yes No Unknown

Is the cat litterbox trained? Yes No Has accidents Is outdoor only

Environment: indoor only ndoor/outdoor mostly outdoor outdoor only

Has the cat been around children? Yes No Unknown Ages? _____

What was the cat's reaction? _____

Has the cat been around dogs? Yes No Unknown Small dogs _____ Large Dogs _____

What was the cat's reaction? _____

Has the cat been around other cats? Yes No Unknown

What was the cat's reaction? _____

Background

From where did you acquire this cat? _____ How long have you had this cat? _____

Besides yours, how many homes has this cat had? _____

What do you like best about this cat? _____

What do you dislike about this cat? _____

Do you have other animals? Yes No What kind and how many? _____

Why are you surrendering this cat? _____

If we could help resolve this issue, would you consider keeping this cat? Yes No Maybe

How soon do you need assistance in rehoming this cat? _____

Chico Cat Coalition Use Only

If unowned, has the owner of this cat been looked for for 30 days? _____ Approved for waiting list by: _____