



# FieldHaven Peace of Mind Cat Guardian Program – Cat Information Form

Please fill this form out as completely as possible. No one knows and loves your cat the way you do. In order to find the most appropriate home for your cat, please provide as much detail as possible about history, past veterinary care, likes, and quirks of your feline friend (and be honest!). Behavioral and medical issues do not necessarily create problems, but failing to disclose them certainly can. Please provide one for each cat entering the program. Feel free to attach any additional information and a photo to this document.

## Name \*

First Name      Last Name

## Email \*

example@example.com

## Home Address \*

Street Address

Street Address Line 2

City      State / Province

Postal / Zip Code

## General Information

**Cat's Name \***

**Cat's Birthdate \***



Month Day Year

**Cat's Sex \***

**Is your cat spayed or neutered? \***

Yes

No

**Is your cat microchipped? \***

Yes

No

Not sure

**Who is the microchip registered to?**

Self

Someone else

**Microchip Company**

**Microchip Number**

**Has your cat ever bitten anyone? \***

Yes

No

**If so, when?**



Month Day Year

**If yes, please check all that apply**

Love bite

Play bite

Bite clothing

Only minor bite (did not break skin or leave bruising)

Bite (broke skin)

Major bite (broken skin/blood drawn/bruising)

**Where did you obtain your cat? \***

FieldHaven

Breeder

Stray

Another shelter

Pet store

Friend/family

Craigslist

Born in my home

**How long has the cat lived with you? \***

**Is your cat declawed? \***

Yes

No

**If yes**

Front paws only

All four paws

**If yes, when**

As a kitten

As an adult

Acquired declawed

**Personality & Behavior**

**How would you describe your cat most of the time? Check all that apply: \***

- Very active
- Friendly to family
- A clown
- Couch potato
- Shy to family
- Shy to visitors
- Playful
- Talkative
- Affectionate
- Independent
- Aloof
- Quiet
- Lap cat
- Withdrawn
- Playful
- Fearless
- Solitary
- More like a dog

**Where, if any, does your cat like being petted? \***

## Play Style

**How does your cat like to play? Check all that apply: \***

- Plays gently, does not use teeth or claws
- Likes to play rough, may nip or scratch
- Likes to chase and pounce with a variety of toys
- Likes things that crackle, like paper bags
- Likes to play hide and seek
- Will fetch items like bottle caps or toys
- Likes to learn new tricks for treats
- Likes to play with other cats
- Likes to play with dogs
- Not much interest in play
- Chases bugs or moths
- Likes to play in or around water

## Lifestyle & Home Life

**What areas of your home did your cat have access to? Check all that apply: \***

- Indoors only
- Outdoors only
- Indoors at night
- Garage or basement
- Indoors with access to outside
- Screened porch
- Indoors in cold weather
- In barn or shed
- Outdoors in warm weather

**Has your cat regularly been around children? \***

Yes

No

Not sure

**If yes, indicate what ages:**

0 – 2 years

3 – 5 years

6 – 10 years

11 – 18 years

**If your cat lived with children, how did they interact? Check all that apply:**

Cat actively avoided the child

Child could pet the cat

Mutual adoration

Ignored each other

Cat and child played together

Cat hissed or growled at child

**Have the experiences with your cat and children always been positive?**

Yes

No

**If no, please explain:**

**Is your cat more comfortable with: \***

Women

Men

Kids

Seniors

Loves all people

## **Health & Dietary Habits**

**Does your cat see a veterinarian on a regular basis (at least once a year)? \***

Yes

No

**Which vet office/clinic is your cat seen at?**

**Are there any illnesses or conditions a new owner should know about? \***

Yes

No

**If yes, please explain:**



**What does your cat eat? \***

Dry only

Wet only

Combination of dry and canned

People food

**Does your cat have a preferred brand and flavor? \***

**What type of treats does your cat enjoy? \***

**How often do you feed your cat? \***

Food always available

Fed once a day

Fed twice a day

**Does your cat need a special diet? \***

Yes

No

**If yes, please describe**

**Would you consider your cat to be a picky eater? \***

Yes

No

**Is your cat on any type of flea treatment? \***

Yes

No

**If yes, what kind?**

Advantage Frontline Revolution

## **Litter Box Use**

**Did your cat have access to a litter box in the house? \***

Yes

No

**If no, did your cat use the bathroom only outdoors?**

Yes

No

**If sometimes, how often does your cat make mistakes? \***

**Please describe the accidents:**

Urinate outside the box

Defecate outside the box

Urinate on clothing/furniture

Sprays on walls/furniture

All of the above

**How often was the litter box scooped? \***

- Every day
- Every few days
- Weekly
- Rarely

**What type(s) of litter was used? \***

- Unscented
- Scented
- Clumping
- Non-clumping
- Crystal
- Clay

**If other cats are in your home, how many shared a litter box?**

- One
- Two or more

**If litter box accidents were an issue, when did they begin?**

- Past month
- Past year
- Ongoing

**Can you pinpoint an event or events that might have influenced or triggered inappropriate litter box use?**

**Please describe what 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?**

**What else would you like us to know about your cat?**

## **Other Animals**

**Has your cat lived with other animals? \***

Yes

No

**How many dogs? \***

**What were the sexes of the dogs?**

Male

Female

**How did they behave with the dogs?**

Ignored

Acted bossy

Played with

Acted shy

**How many cats? \***

**What were the sexes of the cats?**

Male

Female

**How did they behave with the cats?**

Ignored

Acted bossy

Played with

Acted shy

**How many other animals? \***

### **What were the sexes of the other animals?**

Male

Female

### **How did they behave with the other animals?**

Ignored

Acted bossy

Played with

Acted shy

## **Office Use Only**

Do not fill out this section. For office use only.

### **Profile Reviewed with Patron By**

### **Comments**

We will contact you shortly. If you have any questions, please contact us at (916) 434-6022

**By completing this form you agree to receive periodic email communication from FieldHaven Feline Center. You may unsubscribe at any time by clicking on the "unsubscribe" link at the bottom of any email.**

