

ASSESSMENT FORM

We would be grateful if you could answer the following questions as this will assist us in the re-homing of your Great Dane.

How does your Great Dane interact with regards to the following? Please circle where appropriate.

ADULTS	very well	OK	not very well	not at all
CHILDREN	very well	OK	not very well	not at all
OTHER DOGS	very well	OK	not very well	not at all
CATS	very well	OK	not very well	not at all
OTHER ANIMALS (please specify)	very well	OK	not very well	not at all

Has your Great Dane ever been involved in any incidences with other animals?

Has your Great Dane had any accidents or illnesses?

Is he/she inoculated?

Is he/she neutered/spayed?

What is your Great Dane's diet – any food allergies? How often do you feed and when?

What is your daily routine? i.e. walks etc.

Does your Great Dane have any like or dislikes? i.e. toys, settee, titbits – gun fire, fireworks, thunderstorms.

Is there anything else that a new owner should know about your Great Dane?

I have answered the above questions to the best of my knowledge, as I understand that this will assist in the safe and successful re-homing of my Great Dane.

Signed Signed

(Owner) (Witness)

Date Date