Feline Personality Profile

Please take the time to fill out this information as thoroughly and accurately as possible. The answers to these questions will help us to assess this cat's adoptability as well as determine what type of household he or she should be placed in.

Missing or incomplete answers may affect this cat's chances of finding a new home.

Cat's name:			Age:		
What does this cat er	njoy?				
☐ Being carried/picked	l up □ Playing:	□St	Sitting on a lap □ Lookin ring □ Glitter or jingle balls	□ Fi	shing pole toys
What does this cat di	slike?				
	•		□ Dogs □ Other cat		
When you do someth	ing this cat dislik	kes, h	ow does he/she react?		
	•		ses		□ Bites
			to a person? If yes, pleas		
Staff Initials		U	1 3 7 1	1	
☐ Scratched a person:					
			·		
Please rate how the c	at reacts to the fo	ollow	ing things:		
New people	1-very shy	2	3-warms up eventually	4	5-very friendly
Large groups of people	1-runs and hides	2	3-warms up eventually	4	5-very outgoing
Small children	1-runs and hides	2	3-warms up eventually	4	5-very outgoing
Loud noises	1-runs and hides	2	3-runs but comes back	4	5-no reaction
Other cats	1-attacks them	2	3-interested but reserved	4	5-affectionate or playful
Dogs	1-attacks them	2	3-interested but reserved	4	5-affectionate or playful
Cat carriers	1-runs and hides	2	3-can be coaxed in	4	5-goes right in
A trip to the vet	1-terrified	2	3-nervous but tolerant	4	5-completely fine

What other types of animals did this cat live with? (Please list species, age	and sex of each	animal)
How did this cat get along with these animals?		
Is this cat declawed? □ No □ Front paws □ Rear paws Age the cat was dec		
Does this cat use a scratching post? ☐ Yes ☐ No ☐ None provided		
What types of scratching surfaces were made available to the cat?		
☐ Carpet post ☐ Rope post ☐ Wood/log post ☐ Cardboard scratch pad ☐ Ot	ther:	
Where was this cat kept? □ Indoors only □ Indoors/outdoors □ Outdoors		
If outdoors, how is this cat confined? □ Tied □ Supervised □ Not confined	ed	
How often is this cat fed? □ Once a day □ Twice a day □ 3+ times a day	☐ Food always av	ailable
What brand of food is this cat fed?		
What veterinary clinic has the most current medical records for this cat? _		
In the past five years, please list all non-routine or unusual reasons that thi	s cat has gone to	the
veterinarian. (Please indicate the month and year of these visits.)		
Is this cat currently on any medication or special diet? ☐ Yes ☐ No		
If yes, please list what type and for what problem:		
When is the cat due for a Rabies vaccination?		
When is the cat due for a Distemper vaccination?		
When was this cat last tested for Feline Leukemia?	☐ Not tested	
When was this cat last tested for Feline Immunodeficiency Virus (FIV)? _		□ Not tested
Other comments:		

Adopters: The cat's previous owner has completed this personality profile. We cannot guarantee the accuracy of the information provided.