

BEHAVIOR ASSESSMENT FORM

Case # _____ ID # _____ Holding Pen # _____ Other # _____

Investigating Agency _____

Location of exam	Examination date	Examination time
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Animal:

Name	Species	Breed
Gender	Age	Weight
Color/Markings	Description	General Health Condition

Temperament Assessment

Overall Exam Touch/Reaction	
Food Aggression	
Human Social Response	
Reaction to Stranger	
Dog/Dog Social Response	
Dog/Cat or other species Social Response	
Prey Drive	
Territorial/Guarding of Items, People, Location	
Arousal Behavior	
Restraint/Hugging/Crowding Reaction	
Manners	
Safety Concerns:	



General comments: _____

Recommendations: _____

Assessed by: _____ Signature: _____ Date: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Type: _____
Witnessed by: _____ Signature: _____