



We protect those who can't protect themselves

**SWIFT CURRENT SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS**

2101 Knight Crescent, Box 1163, Swift Current, SK S9H 3X3 Telephone: 773-1806 Email: info@spcaswiftcurrent.com Web site: www.spcaswiftcurrent.com

**Cat Behaviour Profile**

CAT'S NAME \_\_\_\_\_ BREED \_\_\_\_\_

SEX  Male  Female  Neutered  Spayed

CURRENT AGE \_\_\_\_\_

DECLAWED?  Front only  All four  Rear only  Not declawed

**ABOUT YOUR CAT'S HEALTH**

How old was your cat when you obtained him/her? \_\_\_\_\_

From where did you obtain the cat?

Found/Stray  Previous Owner  Rescue Group  Breeder  Bred at Home  Shelter (name) \_\_\_\_\_  Pet Store (name) \_\_\_\_\_

**ABOUT YOUR CAT'S HEALTH**

Has your cat been to a veterinarian in the past year?  Yes  No

Is your cat current with its vaccinations?  Yes  No

Please provide the name, address, and phone number of your veterinarian:

Does your cat have any medical problems?  Yes (check all that apply)  No

- Allergies\*  Arthritis  Conjunctivitis  Diabetes
- Epilepsy or seizures  Giardia or diarrhea  Heart murmur  Abscess or cuts
- URI  Organ failure  Thyroid  Tumours  Other\*

For allergies or other, please explain:

What medication is your cat currently taking? \_\_\_\_\_

**ABOUT YOUR CAT'S HABITS AND BEHAVIOURS**

Where does your cat spend most of his time?

- Inside only  Outside only  Inside at night
- In barn or shed  Inside with access to outside  Garage or basement
- Other: \_\_\_\_\_

Housetraining - Check all that apply

- Uses a litterbox  Goes outside  Has occasional accidents  Has frequent accidents
- Sprays

If your cat does not consistently use a litterbox, please fill out supplemental profile.

What kind of litter does your cat prefer? \_\_\_\_\_

What brand of cat food does your cat prefer? \_\_\_\_\_

How much does your cat eat? \_\_\_\_\_

When does your cat eat? \_\_\_\_\_

Has your cat ever had experience with children:  Yes  No

Lived with children

Ages: \_\_\_\_\_

Regularly visited by children

Ages: \_\_\_\_\_

Infrequently contact with children

Ages: \_\_\_\_\_

No experience with children

Negative experience with children (please explain):  
\_\_\_\_\_  
\_\_\_\_\_

Would you recommend your cat be placed in a home with children?

Yes, any age of children  Yes, but only children older than \_\_\_\_\_

No

Has your cat ever lived with other animals?  Yes (check all that apply)  No

Other cats only  Dogs only  Rodents

Would you recommend your cat be placed in a home with other animals?

Other cats only  Dogs only  No other animals  Small animals (specify) \_\_\_\_\_

Does your cat have any fears?  Yes (check all that apply)  No

Strangers  Vacuums  Loud noises  Thunder/Lightning

Other: \_\_\_\_\_

What does your cat do when frightened?  
\_\_\_\_\_  
\_\_\_\_\_

Has your cat ever bitten someone and broken the skin?  Yes  No Date of Last Bite: \_\_\_\_\_

Does your cat have any behavioural issues?  Yes (check all that apply)  No

Nipping  Scratching people  Scratching rugs or furniture  Other: \_\_\_\_\_

What are your cat's favourite toys and activities?  
\_\_\_\_\_  
\_\_\_\_\_

Reason for surrender:  
\_\_\_\_\_  
\_\_\_\_\_

Please use the space below for any additional information you would like to share about your cat.  
\_\_\_\_\_  
\_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_