



German Shepherd Resource and Rescue Center

Placement Assistance Application

Please Note: Your name, E-Mail Address and State are required to receive a reply from us. All questions must be answered for your request to be considered. If you have any questions about this application, please contact us.

Name			
Street Address			
City	State	Zip	
Home Phone	Work/Cell Telephone		
E-Mail Address			
Contact Method Preferred	<input type="checkbox"/> Home Phone <input type="checkbox"/> Work Phone <input type="checkbox"/> Email		
Are you 18 yrs. or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Please realize GSR&RC cannot accept German Shepherd Dogs from all over the country. We concentrate on helping German Shepherd Dogs in the New England States; MA, NH, CT, RI, VT, ME. If you are not in our area, we will provide you with a website to a network of German Shepherd Dog Rescue Organizations in hopes that a rescue closer to your location will be able to help you.

GSR&RC is a purebreed rescue and as such, we are sorry to say we are not always able to accept GSD mixes. Adopters who come to us are specifically looking for German Shepherd Dogs. If the dog in your possession is not a purebred GSD, he/she may be easier to place with a local mixed breed rescue. However if your dog's primary breed is German Shepherd and he/she looks like a German Shepherd Dog, we may be able to accept him/her if we have an opening and if he/she passes our evaluation.

If you are representing a Shelter or Animal Control Organization please do not fill out this Surrender Application. Instead please e-mail us at info@germanshepherdcenter.org.

Requirements

Before any surrender is possible, your dog must be:

- Current on vaccines
- Spayed/Neutered,
- Heartworm negative and on preventative

We MUST have proof of vaccinations, rabies, spay or neuter and of the heartworm test or the owner must make a **\$200.00** surrender fee to GSR&RC to help us recover some of the cost of preparing your dog for adoption.

If you are unable to meet these requirements, please explain more about your situation here, and then continue to complete the rest of this form.

I cannot meet the GSR&RC requirements because...

GSR&RC will consider your circumstances, and a decision will be made to determine if your dog will be accepted into GSR&RC. It may take several days for us to get back to you **with** the results of this decision, please be patient. If any questions are left unanswered, this form will **NOT** be considered.

You must submit two pictures of your German Shepherd Dog, preferably a front and side view.

If you have more than one dog to surrender, please fill out one application for each dog, making sure your name and email address is on each application. If we have any further questions, we will contact you by phone or by email

Dog and Household Information

1. Dog's name _____ 2. Sex Male Female
3. D.O.B (mm/dd/yy) _____ or Age (if D.O.B unknown) years _____ months _____
4. Breed _____ 5. Weight _____ lbs.
5. How long have you had this dog? years _____ months _____
6. Is the dog spayed or neutered? Yes No
7. Your relationship to dog?
 Owner Friend/caretaker Foster owner Other _____
- 7a. If you do not own this dog, why you have the dog? _____
- 7b. What is the name and phone number of the owner? _____
- 7c. Where is the dog currently located? _____
8. Where did you get this dog from?
 This shelter Friend/relative Newspaper/web site Found/stray Pet store
 Breeder (please write name) _____
 Other shelter/rescue (please write name) _____
 Other (please describe) _____
- 8a. If from a breeder, shelter/rescue or private party, did you sign a first right of refusal contract?
 Yes No
- 8b. Have you contacted the breeder/shelter rescue/private party?
 Yes No
- 8c. If you haven't contacted them, why not (be specific)? _____
- 8d. Is this dog AKC registered? Yes No
- 8e. If so, do you have the papers? Yes No
9. Why are you giving up this dog? _____

10. Including yourself, how many people of the following ages live in your house? Please fill in the boxes.

Age range (years)	Female	Male
0-3		
4-9		
10-17		
18-29		
30-60		
60+		

11. What other animals did your dog live with?
 No other animals in household Dogs Cats Other (Please describe) _____

Typical Behavior

(Your dog's **usual** behavior)

12. How does your dog usually behave toward the following? Please check the boxes.

	Never encounter	Friendly	Afraid	Shows teeth/growls	Snaps	Bites	None of these
People your dog knows							
Men							
Women							
Children							
Unfamiliar people							
Men							
Women							
Children							
Animals your dog knows							
Dogs							
Cats							
Unfamiliar animals							
Dogs							
Cats							

 **13. Does your dog usually uncontrollably chase or attempt to chase any of the following?** Please check all that apply.

- Joggers Bicycles Skateboarders/roller bladers Cars/motorcycles
- Outdoor cats Squirrels or other small animals Birds Doesn't chase
- Other (please describe) _____

14. How does your dog usually react when you or another family member does the following? Please check boxes.

	Never tried	Enjoys	Allows	Afraid	Shows teeth/growls	Snaps	Bites	None of these
Bathe								
Brush								
Wipe feet								

15. How does your dog usually react when an unfamiliar person approaches or enters the yard or house?

- Friendly Afraid Barks Shows teeth/growls Snaps Bites None of these

16. Do you take your dog out to go to the bathroom?

- Yes (please specify how many times per day) _____ No/paper trained

17. Does your dog usually have "accidents" in the house?

- Yes (please specify how many times per day) _____ No

18. Where does your dog spend most of his/her time?


- Inside the house, runs free Inside the house, in cage Inside the house, contained in a certain room
- Outside the house, runs free in the yard Outside the house, in cage Outside the house, tied
- Outside the house, runs free in the neighborhood Other (Please describe) _____

19. How long is your dog left alone, without people, during the day?

- Never 1-3 hours 4-8 hours 9-12 hours Over 12 hours

20. When your dog is left alone, is he/she...

- Outdoors Free in home Confined to a room In a cage Other (Please describe) _____

 21. When left alone, does your dog *usually* show any of the following behaviors? Please check all that apply.

- Destroy household items Urinate/defecate Bark Cry None of these

22. When you are home, does your dog *usually* show any of the following behaviors? Please check all that apply.

- Destroy household items Urinate/defecate Bark Cry None of these

23. When your dog plays, does he/she typically... Please check all that apply.

- Jumps Growls Barks Bites lightly Bites hard None of these

24. What toys does your dog like?

- Balls Frisbee Plush Squeaky Tug Toy None Other (Please describe) _____

24a. Is your dog overly possessive about his toys/food? If so, please describe.

- Yes No Please describe: _____

25. What games does your dog like?

- Fetch Tug Chase Wrestling None Other (Please describe) _____

26. Is your dog scared of anything?

- Yes (Please describe) _____

No

27. Please tell us your dog's "bad habits" _____

28. Is your dog allowed on furniture? Yes No

29. Where does your dog *usually* sleep overnight?

- Cage Floor Dog bed Couch Owner's bed Other (Please describe) _____

30. What commands does your dog know?

- No commands known Sit Stay Down Come Heel Give paw

- Other (Please describe) _____

31. Has your dog attended any obedience training classes? Yes No If so, where _____

32. Has your dog ever been walked on the leash? Yes No 33. Does s/he heel or pull? Heel Pull

34. Does your dog have problems riding in the car?

- Yes (Please describe) _____

- No Don't know

 35. Has your dog escaped your property 2 or more times in the last 6 months?

- Yes (Please describe) _____

No

 Questions marked by paw print are necessary to complete the behavioral history for the Dog Rehoming Program.

Aggressive Behavior

(Behavior that has **ever** happened)

36. Has your dog ever inflicted a bite to a person or is there any report of your dog ever inflicting a serious bite to a person (such as an attack or a bite requiring hospitalization)?

Yes No Don't know

37. Has your dog ever attacked another dog resulting in severe injury or death to another dog?

Yes No Don't know

38. Has your dog ever attacked another domesticated animal species (cats or livestock but not "small pets" like hamsters, guinea pigs, etc.) resulting in severe injury or death to another domesticated animal?

Yes No Don't know

39. Please check the appropriate box if your dog has ever shown any of the following aggressive behaviors toward men, women, children, dog, or another domesticated animal species (cats or livestock, not "small pets" like hampsters, guinea pigs, etc.) Do not include aggressive behaviors directed toward a veterinarian or groomer.

	Shows teeth/growls	Snap	Bite	None of these	Do not know
Men					
Women					
Children					
Dog					
Other domesticated animal species (cat, livestock, etc.)					

40. If a snap or bite to men or women was checked, did the snap or bite to adult take place while breaking up a dog fight or while a dog was in severe pain? Yes No

41. If snap or bite to children was checked, did the snap or bite to a child take place while breaking up a dog fight or while a dog was in severe pain? Yes No

42. Please explain the circumstances of the snap or bite. If you checked more than one bite in the table above, please explain the circumstances of every snap or bite.

43. If any aggressive behavior to men, women, or children was checked in the table above, please answer the following questions. If does not apply, skip the table.

	Men		Women		Children	
	Yes	No	Yes	No	Yes	No
Was the aggressive behavior over food?						
Was it over bones or rawhides or chews?						
Was it over toys?						
Was it over stolen objects?						
Was it when the dog was disturbed while sleeping or resting?						
Was it when an adult or child handled the dog (brushing, handling feet, bathing, teeth brushing, ear cleaning, etc. but do NOT include reaction to vet or groomer)?						
Was it when an adult or child entered the house or yard?						
Was it when an adult or child approached or reached toward dog?						

Medical History

44. Does your dog see a veterinarian at least once a year? Yes No

45. If "yes", please specify the veterinarian name and contact info:

Veterinarian Name _____ Contact info _____

 46. Check if your dog has ever shown any of the following aggressive behaviors when handled by a veterinarian or groomer.

	Never done	Show teeth/ growl	Snap	Bite	None of these
Examine (including heart and ears)					
Restrain					
Administer shots					
Trim nails					
Take blood					

47. Does your dog have to be muzzled at the veterinarian? Yes No

48. Does your dog have any past or present medical conditions?

Yes (Please describe) _____
 No

49. Is your dog spayed/neutered? Yes No If yes, please provide proof of this in writing from your vet.

49a. If not, are you willing to pay to have it done? Yes No

51. What vaccines does your dog have? (Please complete the info below.)

Did the dog get a Rabies vaccine? ____ Yes ____ No ____ Unknown.	
If yes, when did the dog get immunized? _____ (mm/dd/yyyy)	
What type? ____ 1 yr. ____ 2 yr. ____ 3 yr.	
Did the dog get any other vaccinations?	
Bordetella?	____ Yes ____ No ____ Unknown If yes, when? _____ (mm/dd/yyyy)
DHLPPC?	____ Yes ____ No ____ Unknown If yes, when? _____ (mm/dd/yyyy)
Lyme?	____ Yes ____ No ____ Unknown If yes, when? _____ (mm/dd/yyyy)
Giardia?	____ Yes ____ No ____ Unknown If yes, when? _____ (mm/dd/yyyy)
Heartworm Test?	____ Yes ____ No ____ Unknown If yes, when? _____ mm/dd/yyyy
Heartworm Test Results?	____ Positive ____ Negative
Heartworm Preventative? [] Yes [] No	What Brand?

52. Was/Is this dog on any other medications? ____ Yes ____ No ____ Unknown

If so, what are they?

Medication	Dosage	Frequency

Please attach all background information that you may have on this dog. This includes but is not limited to copies of medical records from previous owner or from Shelter/ACO, registration papers, etc.


53. Does this dog have allergies? Yes No **If so what medications are required?** _____
54. Has your dog had any surgeries? Yes No **If so for what?** _____
55. Has this dog ever required emergency care? Yes No **If so for what?** _____
56. Has your dog been x-rayed for Hip Dysplasia? Yes No
- 56a. If so, do you have the certification that s/he is Hip Dysplasia free? Yes No
57. Is your dog currently on a special diet?
 Yes (Please describe) _____
 No

Please be advised we will want to speak with your veterinarian. Please contact your veterinarian to let him/her know we will be calling and that you authorize him/her and/or their representatives to release all records of your dog to us.

58. What type of dog food does your dog eat?
 Dry Wet/Canned Table Scraps
59. What brand of dog food do you feed your dog? _____
60. How often and when do you feed your dog? _____
61. Does this dog have a microchip or tattoo? Yes No **If so what is the number:** _____
62. Has your dog been guard or protection trained? Yes No
63. Are you able to care for your dog until a foster/adoptive home can be found? Yes No
- 63a. If not, why not (please explain) _____
64. How did you hear about German Shepherd Resource and Rescue Center, Inc.?

65. Please feel free to tell us any additional helpful comments.

Please let us know if you would like to make a donation in addition to the surrender fee to help care for animals at this rescue.

 Questions marked by paw print are necessary to complete the Behavioral History section on the Dog Rehoming Program.

Agreement and Signature

We reserve the right to refuse acceptance of any German Shepherd Dog. Acceptance is based on many criteria, one of which is space availability. If you are out of our area, we will pass on your surrender form to another rescue.

I understand that the information contained in this form may be passed on to another rescue and I give GSR&RC permission to do so.

Yes? No? (Please circle one).

I certify the information provided on this form to be true & correct. I understand that a physical evaluation of the dog and a temperament test will be performed by an experienced rescue volunteer to ensure we feel the dog is able to be re-homed before my dog is accepted into GSR&RC's program.

I give GSR&RC permission to come to my home and perform an evaluation and temperament test on my dog.

Yes? No? (Please circle one).

If during the evaluation process GSR&RC finds the information contained in this surrender form to be false, GSR&RC retains the right to turn down acceptance of the dog you are surrendering.

I also understand that I must submit proof of vaccinations, rabies, heartworm test and proof of spay or neuter to GSR&RC and if I cannot do this, a \$200 donation will be required to cover these expenses if my dog is accepted into the rehome program. If I have proof, a \$100 donation will be appreciated. I must also submit a copy of all health records of the dog to GSR&RC and I must submit at least one picture of your dog to GSR&RC.

I also understand if I am not able to meet these prerequisites, GSR&RC will take into consideration my circumstances which I have explained on page 2 in determining the acceptance of my German Shepherd Dog.

Name (printed)	
Signature	
Date	

Please send a copy of all **health records** along with a signed copy of this form and at least one **picture** of your dog, to GSR&RC, P.O. Box 57, Hathorne, MA 01937. If you prefer, email it to us at intake@germanshepherdcenter.org. If you do not send the health records with this application and you have not stated the reason for not doing so on this form, your application will not be considered.

Thanks to Majesty Rottweiler Rescue, Yankee Golden Retriever Rescue and ARL Boston for help in developing this application.