



INFORMATION ABOUT YOUR NEW DOG

Dog's Name: _____ Nick Names? _____

VERBAL CUES:

This dog has been taught the following verbal cues:

- ☐ **Sit:** *before he/she is fed or given a toy, goes outside etc.*
- ☐ **Leave It:** *meaning he/she may not sniff or pick up an object, should walk away.*
- ☐ **Wait:** *meaning he/she may look at an object but not pick it up until an "ok".*
- ☐ **Potty:** *to go outside and relieve*
- ☐ **Pick It Up:** *the dog is taught to either pick up something thrown like a ball or something of interest.*

Other:

SCHEDULE:

The times throughout the day for eating etc.

_____	Wakes Up	
_____	First Outside Time	
_____	Bowel Movement Time(s)	Bowel Movement x2 _____
_____	First Feeding	How Much? _____
_____	Second Feeding	How Much? _____
_____	Nap Time	Bed Time _____

FOOD & TREATS:

Food Brand: _____

Favorite Treats: _____

MEDICATIONS and/or ALLERGIES:

Please list any medications or special considerations for your dog, for prescribed meds please list the name, amount and dosage:

LIKES & DISLIKES:

Shy Around:

Loves:

Needs More Work On:

Other:
