



*Office Use Only*

Animal #: \_\_\_\_\_

Program Entrance Date: \_\_\_\_\_

Staff: \_\_\_\_\_

### Facilitated Adoption Profile – Avian

Owner Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address:

Phone Number

E-mail:

Bird's Name: \_\_\_\_\_ Does he/she respond to his/her name?:  Yes  No

Reason for Rehoming: \_\_\_\_\_

\_\_\_\_\_

1. How old is your bird? \_\_\_\_\_ 2. How long have you had your bird? \_\_\_\_\_

3. Do you have proof of your bird's age?  Yes  No

4. Your bird's sex:  Male  Female  Unknown

5. Do you have proof of your bird's sex?  Yes  No

6. What species is your bird?: \_\_\_\_\_ 7. What subspecies/breed?: \_\_\_\_\_

8. How did you acquire your bird?  Pet store  Friend/Family  Newspaper/Internet

Gift  Stray  Shelter/Rescue Group: \_\_\_\_\_

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

9. How old was your bird when you acquired him/her? \_\_\_\_\_

10. What kind of food(s) do you feed your bird?  Basic seed mix  Gourmet seed mix  Nuts

Pellets  Fresh greens  Fresh vegetables  Fresh fruits  Bread

Pasta  Table Scraps  Other \_\_\_\_\_

11. What brand(s) are you feeding? \_\_\_\_\_

12. How often does your bird eat dry food?  Daily  Occasionally  Never

12. How often does your bird eat fresh food?  Daily  Occasionally  Never

13. What supplements are you offering? \_\_\_\_\_

14. What treat(s) are you offering? \_\_\_\_\_

### Living Habits

15. My bird is used to living in:  apartment/condo  house  garage  balcony  
 outdoor enclosure  other \_\_\_\_\_
16. The room my bird is kept:  basement  living room  kitchen  child's bedroom  
 adult's bedroom  spare room  other \_\_\_\_\_
17. My bird's enclosure is:  a cage  an aviary  free-flight
18. The dimensions of the enclosure are: \_\_\_\_\_
19. The bedding my bird is used to in the enclosure is:  
 Newspaper  blank newsprint  corn cob  wood shavings  
 other: \_\_\_\_\_
20. My bird comes out of the enclosure:  every day  once/week  rarely  never
21. The length of time my bird's out:  5-15 min  15-30 min  30-60 min  1-2 hrs  2-4 hrs  
 4-8 hrs  8-12 hrs  12 hrs +  free-flight
22. My birds wings are:  clipped  fully flighted
23. If wings are clipped, how often is this done? \_\_\_\_\_
24. My bird is allowed on:  all furniture  some furniture  no furniture
25. My bird's favourite toy(s): \_\_\_\_\_
26. My bird's problem behaviours include:  
 chewing wall trims  chewing furniture  chewing household items  
 ripping household items  chewing wires  eat household plants  
 screaming  plucking  self mutilation  
 cage aggression  sexual behaviour  
 other aggression: \_\_\_\_\_  
 other: \_\_\_\_\_
27. In your opinion, what would the ideal home environment for this bird look like? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### **Temperament and Personality**

28. My bird is used to:  living with children  visiting with children  not used to children
29. These children are aged:  0-3 yrs  4-6 yrs  7-10 yrs  11-15 yrs  16 yrs+
30. My bird:  enjoys being with children  tolerates children  is nervous of children

is aggressive towards children

31. How many people live in the household my bird is used to : \_\_\_\_\_ Adult female, \_\_\_\_\_ Adult male,  
\_\_\_\_\_ Child female, \_\_\_\_\_ Child male

32. In your opinion, would this bird do well in a home with children? Why/why not? \_\_\_\_\_  
\_\_\_\_\_

33. My bird is used to:  living together with the same species  living near same species  
 has never had contact with the same species

34. My bird is used to:  living together with other bird species: \_\_\_\_\_  
 living near other bird species: \_\_\_\_\_  
 has never had contact with other bird species

35. My bird is used to:  living with dogs – breed(s)/age(s): \_\_\_\_\_  
 living with cats – age(s): \_\_\_\_\_  
 living with other animal(s): \_\_\_\_\_

36. My bird is nervous of:  dogs  cats  other animal(s): \_\_\_\_\_

37. My bird is aggressive with:  dogs  cats  other animal(s): \_\_\_\_\_

38. In your opinion, would this bird do well in a home with other species? Why/why not? (please specify species):  
\_\_\_\_\_

39. With strangers, my bird is usually:  friendly  nervous  aggressive

40. In a new environment, my bird is usually:  curious/outgoing  nervous/fearful

41. When traveling in the car, my bird is usually:  calm/relaxed  nervous/fearful

42. My bird is afraid of: \_\_\_\_\_

### **Handling**

43. My bird will step up:  always  sometimes  never

44. When handling, my bird:  enjoys it  seems indifferent  bites

45. My bird is used to being bathed:  every day  once/week  rarely  never

Method: \_\_\_\_\_

46. When bathing, my bird:  enjoys it  seems indifferent  bites

47. My bird is used to nail trims:  regularly  rarely  never

48. Nail trims are done:  at home  at a groomer  at the vet

49. When trimming nails, my bird:  enjoys it  seems indifferent  bites

50. My bird is used to beak trims  regularly  rarely  never
51. Beak trims are done:  at home  at a groomer  at a vet

**Bird's Health Record**

52. Veterinary Clinic: \_\_\_\_\_

53. Veterinarian's Name: \_\_\_\_\_

54. Clinic Location: \_\_\_\_\_

55. Clinic Phone #: \_\_\_\_\_

56. How long have you used this clinic? \_\_\_\_\_

57. Has this bird been to any other clinic?  No  Yes: \_\_\_\_\_

58. Do you have the Veterinary Health Records?  Yes  No  Have been faxed

59. How does your bird react to visiting the vet clinic?  Well  Poorly  Nervous

60. How does your bird react to the veterinarian?  Well  Poorly  Nervous

61. Has your animal had any medical concerns in the past?  No  Yes

If yes, please specify: \_\_\_\_\_

62. Does your animal have any current medical concerns?  No  Yes

If yes, please specify: \_\_\_\_\_

63. Has the animal been on any medications (including homeopathic remedies) in the past?

No  Yes: \_\_\_\_\_

64. Is the animal currently on any medications (including homeopathic remedies)?

No  Yes: \_\_\_\_\_

65. Have there been any recent changes to the following:

feather condition  eye condition  foot/leg condition  beak condition

appetite  energy level  breathing  perching

other behaviour: \_\_\_\_\_

66. When was your bird last at the vet? \_\_\_\_\_

67. What procedures were done? \_\_\_\_\_

68. Is there any additional information you would like us to know about your bird? In order to match your animal to an appropriate adopter, please provide as much information as possible? \_\_\_\_\_

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STAFF NOTES

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## **FACILITATED ADOPTION ANIMAL BEHAVIOUR SUMMARY**

*To be shared with adopters, please do not include personal information*

**Date:** \_\_\_\_\_

**Pet's name:** \_\_\_\_\_ **Does he/she respond to his/hers name:**  Yes  No

### **Diet**

**4. What kind of food do you feed your pet?:**  Only dry  Only canned  Mix of dry/canned

Special diet

Brand of food: \_\_\_\_\_

Frequency and amount of food fed: \_\_\_\_\_

**5. What else does your pet eat? (Table scraps, treats, etc.)** \_\_\_\_\_

### **Indoor/Outdoor Habits**

**6. My pet is used to living in a(n):**  Apartment/condo  House with no/small yard  House with large yard

Farm or rural property

**7. My pet is house or litter trained:**  Yes  No  Sometimes

Comments: \_\_\_\_\_

**8. On average, how many hours a day is your pet left alone?:** \_\_\_\_\_

**9. My pet gets** \_\_\_\_\_ **walks a day; for** \_\_\_\_\_ **minutes each time**

**10. When I'm not home, my pet is kept:**  In a crate  Isolated to a room/basement  Loose in the house

Outdoors

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**11. When it comes to furniture, my pet is:**  Allowed on all furniture  Allowed on some furniture  
 Not allowed on furniture  Allowed on his/her own bed

Comments: \_\_\_\_\_  
\_\_\_\_\_

### **Training/Behaviour notes**

**12. My pet knows the following commands and has the following training:**

\_\_\_\_\_

**13. Behaviour concerns**

Current behavior issues: \_\_\_\_\_

How have you been dealing with these behavior issues so far?:

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Current behavior issues: \_\_\_\_\_

How have you been dealing with these behavior issues so far?:

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**14. Is there anything other information about your pet that you feel is important for their adopters to know?**

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