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## Basic Intake & Goal Assessment

### Client & Dog Information

Your Name:	Date:
Home Phone:	Work Phone:
Cell Phone:	Email:
How did you hear about us?	
Dog's Name:	Breed/Age/Sex:
Date of Adoption:	
Most recent vet visit and results:	

### Dog's Routine

Describe your dog's daily routine:
What does (Spot) do for exercise, and how often and for how long?
What does (Spot) do when you're gone from the house?
What kinds of toys, chews, etc. does (Spot) play with, and how often? When does he/she play with his/her toys?

## Training History/Reinforcers

Have you done any training with (Spot), or had he/she done any before you adopted him? Where did you do the training? Can you describe the basic approach you learned to train your dog? Did you feel you got the results you were looking for?

What are your dog's favorite foods or treats?

What are your dog's favorite toys:

What are your dog's favorite activities?

## Client's Goals

What would you like your dog to do?

What would you like to be able to do with your dog?

Note: If your dog is an emotional support or service dog candidate, please tell us more about how your dog might help you and what type of access you desire (e.g., airlines, housing, full service access). Emotional support and service dog candidates must supply documentation of disability and sign a training agreement.