

Behaviour Questionnaire

If you have any questions about completing this questionnaire,
please call/text/WhatsApp on 07763829693 or email jen@k9coaching.co.uk



Your details

| | |
|---------------|--|
| Name | |
| Address | |
| Postcode | |
| Phone number | |
| Email address | |

Dog details

| | |
|--|-----------------|
| Name | |
| Age | |
| Breed | |
| Male or female | Neutered? (Y/N) |
| How long have you owned your dog? | |
| From where did you obtain your dog? | |
| Describe your dog In 3 words | |
| Does your dog have any health issues you are aware of? | |

Has your dog ever bitten a person or other animal? If yes, please give details.

Your dog's behaviour

Please briefly describe the problem behaviours you would like to discuss during your consultation.

Behaviour 1

Behaviour 2

What are your dog's favourite treats, toys and activities?

How does your dog react to unfamiliar visitors coming into your house?

Is there anything else you would like to tell us about your dog?

Please give details of who else is in your household?

Do you have any other pets in the house? If yes, please give details.

| NAME | SPECIES | AGE |
|------|---------|-----|
| | | |
| | | |
| | | |

Please email your completed questionnaire to

jen@k9coaching.co.uk

Thank you!