New Kitten (less than 4 months) Questionnaire

<table>
<thead>
<tr>
<th>Owners Name:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Cat’s Name:</td>
<td>Cat’s Age (DOB):</td>
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1. How long has it been since you owned a kitten? ______________

2. Where did you obtain your kitten (breeder, pet store, friend, shelter, rescue, humane society, other)? ______________________________________________________________________________________

3. How long have you had your kitten? ________________________

4. How old was your kitten when you obtained him/her? ______

5. How many kittens were in the litter? __________________

6. How old were the kittens when they were taken away from their mother? ________

7. Where does your kitten spend most of his/her day? (inside, outside, in a room, in a kennel, with you)? ______________________________________________________________________________________

8. How would you describe your kitten’s litter box training?

□ Great, not having any accidents

□ Good, a few accidents have occurred

□ Not a clue, most elimination is happening in a location I do not prefer

Comments: __________________________________________________________________________________________________________________________________

9. How many litter boxes do you have and where are they located?

____________________________________________________________________________________________________________________________________________

10. What is the size and type of litter boxes (covered, uncovered, automatic, oval, large rectangular, etc)?

____________________________________________________________________________________________________________________________________________
11. What type and brand of litter do you use? (scented or unscented, clumping versus clay)
   ________________________________________________________________

12. Does your kitten like to play with toys? What type?
   ________________________________________________________________

13. Does your kitten use scratching posts? ________________

14. Have your enrolled your kitten in a kitten class? If so, where?
   ________________________________________________________________

15. If you have other pets in the household, describe the kitten’s relationship with them.
   ________________________________________________________________

16. Has your kitten ever shown any growling, hissing, or mouthing/biting towards you or anyone else? If so, when?
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

17. Are there things your kitten is afraid of or does not like? If so, please describe.
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

18. Has your kitten shown any of these signs: coughing, sneezing, itching, diarrhea, vomiting, or lack of appetite?
   ________________________________________________________________

19. Any change in water or food consumption? ________________
20. What type of food do you feed your kitten and how often is he/she fed? Is food available all the time or at set "mealtimes"?

______________________________________________________________________________________________

21. Any change in frequency of urination or defecation? __________

22. What, if any, medications (over the counter or prescription) does your kitten take or have applied routinely?

______________________________________________________________________________________________

23. What are three things you enjoy about your kitten?

______________________________________________________________________________________________

______________________________________________________________________________________________

24. Do you have any concerns or topics you would like to discuss?

______________________________________________________________________________________________

______________________________________________________________________________________________