Cat’s name: ____________________________
Nickname: ____________________________

Litter box History
Challenges surrounding litter box usage is one of the main reasons cats are surrendered to the Animal Humane Society. Please help us by giving as much detailed and accurate information as possible.

Does your cat have 24 hour access to a litter box in the home?  □ Yes  □ No
If no, did your cat use the bathroom outdoors?  □ Yes  □ No

Is the litter box:  □ Covered  □ Uncovered

Is the cat particular about litter?  □ Yes  □ No  If so, what type/brand? ____________________________

Does the cat ever have accidents in the home?  □ Yes  □ No
If yes, please describe the accidents:
☐ Urinates outside the box  ☐ Urinates on clothing/furniture
☐ Defecates outside the box  ☐ Sprays on walls/furniture
☐ All of the above  ☐ Other ____________________________

How often was litter box scooped?  □ Every day  □ Every few days  □ Weekly
☐ Other please describe

Where was the litter box kept? ____________________________

If you have other cats, how many shared a litter box?
☐ One  ☐ Two or more  ☐ Many cats shared one box  ☐ Multiple boxes for multiple cats

If litter box accidents were an issue, when did they begin?
☐ Past week  ☐ Past month  ☐ Past year  ☐ Ongoing

If litter box accidents were an issue please list any event(s) that might have influenced or triggered inappropriate litter box use [moving, new baby, new pet]. ____________________________

If litter box accidents were an issue, please describe the measures you have taken to correct this problem. ____________________________

Has your cat been to the veterinarian to rule out infection or underlying health issues?  □ Yes  □ No  If yes, what was the outcome? ____________________________

Medical History and Behavior towards the Veterinarian

Has this cat ever had surgery?  □ Yes  □ No  □ Unknown
If yes, please explain: ____________________________
How does your cat behave during visits to the vet?

Is there anything else we should know about your cat’s medical history?

Household History

Was this cat allowed outdoors?  Yes  No
If yes, did you have him or her on a harness and leash while outside?  Yes  No

How did your cat usually interact with the following in your home?

Cats

Dogs

Children

Unfamiliar adults

Does the cat do any of the following? [check all that apply]
- Jump on counters
- Scratches doors/cabinets
- Digs in garbage
- Scratches doors/cabinets
- Chew furniture
- Chew personal items
- Chew personal items
- Climb curtains
- Vocalizes too much

How did you attempt to correct the problem(s)?

How would you describe this cat’s usual behavior? [check all that apply]
- Friendly to family
- Very active
- A clown
- Couch potato
- Friendly to visitors
- Playful
- Aloof
- Withdrawn
- Shy to family
- Affectionate
- Talkative
- Independent
- Shy to visitors
- Quiet
- Lap cat
- Playful
- More like a dog
- Fearful
- Fearless
- Solitary

When playing does your cat ever bite, scratch or exhibit behaviors you would consider rough?  Yes  No
If yes, please explain

Where does this cat like to sleep?
- On furniture
- In his/her bed
- With a person
- Anywhere sunny / warm
- No preference
- Under furniture
- Other:

Are there any wonderful, special traits or habits that you would like his/her new family to know about?