The following questionnaire provides us with information about how your bird behaved in many different circumstances while he or she was living with you. Because your bird is likely to behave in similar ways in his/her new home, this information will help us find the most suitable home for your bird and to effectively counsel the new family. Your open and honest answers are very necessary and appreciated, so that we can do careful and successful adoptions.

By signing below, I certify that the information I am about to provide is accurate and truthful to the best of my knowledge.

Signature:____________________________________________

Print name:_________________________ Print bird’s name:_________________________

Date:_______________________________________________________
**Part 1: Household History**

1) Bird’s name: _______________ Age of bird? _______ yrs.

2) How long have you had your bird? ______ yrs.

3) Why are you giving up this bird? _______________________________________________________________

4) What would have to happen for you to be able to keep your bird? ________________________________

5) Where did you acquire your bird? Animal Rescue League Other Animal Shelter Friend/Relative 
   Online Found/Stray Breeder Pet Store Gift Other_____________________

6) Please describe your household: Quiet Active Noisy

7) Please list the AGES of household members your bird has lived with:
   Men________________________ Women________________________ Children________________________
   Does your bird have a preference for men over women? _____________________

8) Who was the primary caretaker for the bird? _____________________________

9) How did your bird react when outside of the cage to:
   a. men? Friendly/Approaches Playful Afraid/Runs Away Bites No men in household
   b. women? Friendly/Approaches Playful Afraid/Runs Away Bites No women in household
   c. children? Friendly/Approaches Playful Afraid/Runs Away Bites No children in household

10) How did your bird react when inside of the cage to:
   a. men? Friendly/Approaches Playful Afraid/Runs Away Bites No men in household
   b. women? Friendly/Approaches Playful Afraid/Runs Away Bites No women in household
   c. children? Friendly/Approaches Playful Afraid/Runs Away Bites No children in household

11) What other animals did your bird live with? No other animals in household
   Dogs #____ Breed or Size_________________ Cats #____ Other__________________

12) What was the bird’s reaction to the other animals in your household?
   Ignores Approaches Afraid/Runs away/Vocalizes No contact with other animals in household

13) Do you and your bird live in an? Apartment Condo/Town House Single Family House Duplex

**Part 2: Bird’s Cage History**

1) Where is the bird’s cage located? __________

2) What are the dimensions of caging the bird is housed in? ________________________________

3) Did you cover the cage at night? __________

4) At what time did you cover the cage for the night? _________

5) How often did you clean your bird’s cage? ________________________________

6) Has your bird ever been housed with another bird? Never Yes, in household Yes, sharing cage

7) When alone is your bird: Free in the house/confined to a room In cage With the television or radio left on

**Part 3: Bird’s Behavior History**

1) How much time out of the cage does your bird get daily, if any? _________________

2) Does your bird have a favorite game? _________________
   Does he/she know any words? ________________________________

3) How often did you rotate your bird’s toys? ________________________________
4) Does your bird like to be petted? Yes Tolerates No, bites

5) What are your bird’s favorite types of toys? Bells Wood Chews Plastic Rawhide Other

6) How does your bird respond to visitors? Friendly Playful Afraid/runs away Ignores Bites Never Sees Visitors

7) Is your bird frightened of anything? Thunder Loud noises Vacuum Dogs Cats

               Men    Women    Children    Strangers    Other: ________________________________

12) Please tell us about your bird’s “bad habits”: Vocal/screams Chews on woodwork/destructive

       Bites without provocation    Other: ____________________________________________

13) Is your bird accustomed to: Bathing Nail trimming Medicating Wing trims

14) Does your bird bath in a bowl or with a spray bottle?______________________________

Part 4: Bird’s Medical History

1) Did your bird see a veterinarian on a regular basis? Yes No

   If yes, what is your vet hospital’s name? ______________________________________________

2) Does your bird have any past or present medical conditions? Yes No

   If yes, what are they? ________________________________________________________________

3) Is your bird currently on any medications? ____________________________________________

Part 5: Bird’s Diet

1) What type of food does your bird eat? Pellets Seed Nuts Fresh fruits/veggies Cooked fruits/veggies Pasta Other: ______________________________________

2) Please tell us the specific type/brand of primary diet? __________________________________

3) Does your bird get table food? Yes No What kinds? ______________________________________

4) What is your bird’s favorite treat? ____________________________________________________

Part 6: Additional Information

This bird would do well in a home with the following:

   Kids: Of any age Ages 5 and over Ages 9 and over Ages 14 and over No kids at all

   Other Animals: With cats With dogs No dogs No cats With no other animals Other ________

   Visitors: Many visitors Few visitors No visitors

   Someone home: All day Most of the day In the mornings and evenings

Part 7: Please feel free to tell us any additional helpful information

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

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