



## Shirescot Scottish Terriers Breeder Referral Questionnaire

### General Information

Date: \_\_\_\_\_

Name: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

What is your contact preference? \_\_\_\_\_

Do you agree to a home visit prior to approval for your Scottie? \_\_\_\_\_

### Scottie Preferences

Have you owned a Scottie before? \_\_\_\_\_

If yes, how long have you owned Scotties? \_\_\_\_\_

If no longer with you, what happened to it? \_\_\_\_\_

What pets do you currently have, if any? \_\_\_\_\_

Are you looking for a Companion Pet? \_\_\_\_\_

Are you interested in showing a Scottie? \_\_\_\_\_

Do you have a preference of a male or female? Why? \_\_\_\_\_

Do you have a color preference, if any? \_\_\_\_\_

What are your age preferences for a Scottie? \_\_\_\_\_

Would you consider a retired show Scottie? \_\_\_\_\_

Are you interested in breeding a litter? \_\_\_\_\_

**Living Environment**

Do you live in a single family detached home, a townhouse, or an apartment? \_\_\_\_\_

If you rent or lease, are you allowed to have pets? \_\_\_\_\_

Do you have a fenced yard, and if yes, what type of fence? \_\_\_\_\_

Normally, what number of hours per day would you spend outside with your Scottie? \_\_\_\_\_

Do you have a pool and is it separated by a fence from the rest of the yard? \_\_\_\_\_

What is the number of adults in the family?

ages? \_\_\_\_\_

Will your Scottie have normal/frequent contact with children? \_\_\_\_\_

Is anyone at home during the day? \_\_\_\_\_

How many hours will the Scottie be left alone? \_\_\_\_\_

Where will your Scottie be kept when alone? \_\_\_\_\_

Where will your Scottie sleep? \_\_\_\_\_

Who will groom your Scottie? \_\_\_\_\_

**Additional Comments**

(Additional background you would like to provide)