Duty Danes Comprehensive Client Questionnaire

1**. Personal Information**

• Applicant Name(s):

• Address:

• Phone Number:

• Email:

2. **Training and Experience**

• Great Dane Knowledge: What is your experience with the Great Dane breed? Are you familiar with their unique health needs (Bloat, DCM, Pano, etc.) and average lifespan?

• Prior Dog Experience: Have you owned a dog before? If yes, please list the breeds, and explain what happened to the dog(s).

• Current Pets: Please list all current pets in the household (species, breed, age, and spay/neuter status).

• Household Members: Please list all adults and the ages of any children living in the home.

• Trainer Plan:

• Do you have a professional dog trainer or training facility already selected for your puppy's basic obedience and foundational socialization classes? (Please provide the trainer/facility name and contact information if Yes.)

• What kind of training methods do you plan to use? (Note: Duty Danes strongly encourages force-free, positive reinforcement methods.)

• Service Dog Training: If you intend to train the puppy as a Service Dog, do you have an owner-trainer mentor or a program secured to guide the specialized task training?

3. **Home Environment and Support**

• Residence: Do you own or rent your home?

• Landlord/HOA: If you rent, please provide the name and phone number of your landlord or HOA contact who can confirm a Great Dane is permitted.

• Yard Security: Do you have a fenced-in yard? If so, what type and height?

• Primary Caregiver: Who in the household will be the primary person responsible for the dog's daily feeding, grooming, and emotional well-being?

4. **Concerns and Obstacles**

• Separation: How many hours per day, on average, will the dog be left alone? Where will the dog be kept when you are away from home?

• Common Challenges: How will you handle standard puppy and adolescent Great Dane challenges, such as destructive chewing, house-training accidents, and high-energy "zoomies"?

• Financial Preparedness: Are you prepared for the significant time and financial investment required for a Great Dane, including emergency vet funds for unexpected health issues (like Bloat)?

5. **References and Verification**

• Veterinarian Reference:

• Name of Clinic:

• Phone Number:

• Professional Reference (e.g., Trainer, Handler Mentor, other professional):

  • Name:

  • Phone Number:

• Personal Reference (Non-family member):

  • Name:

  • Phone Number:

6. **Service Animal Intent and Placement**

• Service Dog Intent: Do you intend to train this puppy as a Service Dog?

(Yes/No/Unsure/Therapy Dog/ESA)

• Specific Task: If Yes, please describe the specific work or task the dog will be individually trained to perform to mitigate your disability.

• (Example: "Deep Pressure Therapy (DPT)," "alerting to rising anxiety levels," "Mobility Assistance for bracing," etc.)

• Duty Danes Breeder Note on Service Dog Placement: We ask about the specific task not to question the legitimacy of a disability, but because our mission is "Healing Hearts one paw at a time." This is about ensuring we select the most appropriate puppy from our litter, matching its size, structure, and temperament to the required task to set the puppy up for success.

7. **Placement for a Minor/Child**

• If the puppy is being acquired primarily for the benefit of a child (under 18):

• Primary Adult Caregiver: Who is the primary adult caregiver in the home responsible for the dog's daily feeding, grooming, and veterinary care?

• Primary Handler: Who will be the primary handler responsible for the dog's training, control, and supervision, particularly during public access outings?

• Transition Plan: At what age do you anticipate the child beginning to take over full handling responsibilities for the dog, and what training steps will you put in place for that transition?

ADDITIONAL INSIGHT QUESTIONS

• Expectations: What did you love most about your last or current dog? What did you like least?