

Old LEASH pet surrender request form

First name

Anique

Last name

Ellis

Street address

1821 castleton drive

City

saint cloud

Zip code

34771

Email

ellisanique313@gmail.com

Phone

(407) 807-3285

Reason for surrender

young adult soon to be college student who cannot provide the adequate care I used to

My current living situation is...

I have a stable home.

I have read and understood the pet rehome statement.

yes

About the animal(s)

Number of animals to be discussed?

1

Animal 1

Animal 1 name

Miracle

Animal 1 species

cat

Animal 1 size

11 - 20 lbs

Animal 1 color

tortoise shell

Animal 1 gender

female

Has the animal 1 been spayed?

yes

Animal 1 age

5 years +

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



[miracles headshot.png](#)

Just a few more questions...

How long have you had the animals?

5 + years

Reason(s) for concern - click all that apply.

- no time for care

Other reason not listed

she deserves a home that can provide adequate attention

How we can help you keep your animals?

I don't think there is a way for that to happen

Administration

Shelter to client contact date

10/25/2023

Follow - up required

yes

Follow up notes/actions needed 1

left VM to call back

Agent initials follow up 1

Hardy

Multiple appointments?

no

Outcome data

Call outcome

non responsive to contact/no show

Final call date

01/11/2024

Final surrender outcome

not applicable

Close ticket

yes