

Old LEASH pet surrender request form

First name

Shaina

Last name

Capellan

Street address

700 bloom st

City

Kissimmee

Zip code

34747

Email

[shainacapella@gmail.com](mailto:shainacapella@gmail.com)

Phone

(321) 393-1245

Reason for surrender

I can’t afford to take care of her and I’m not stable at the moment

My current living situation is...

I have been evicted and do not have a home.

Upload file



[IMG\\_1595.jpeg](#)

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

Sharpie

Animal 1 species

dog

Animal 1 dog breed

Sharpie and pitbull

Animal 1 size

21 - 30 lbs

Animal 1 color

White / blonde

Animal 1 gender

female

Has the animal 1 been spayed?

no

Animal 1 age

1 - 2 years

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



IMG\_1580.jpeg

Just a few more questions...

How long have you had the animals?

4 months to 1 year

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

- cost of food
- cost of vet care
- homeless

How we can help you keep your animals?

I am not stable at the moment and I can't afford her I get no help she has really bad separation anxiety and her owner just left her with me and doesn't care for her and leaves her and her behavior isn't great I do believe her owner put her in situations that traumatized her emotionally and mentally

Administration

Shelter to client contact date

11/16/2023

Follow - up required

yes

Follow up notes/actions needed 1

Phone is out of service. Sent email to call us.

Agent initials follow up 1

Hardy

Surrender necessary

no

Multiple appointments?

no

Outcome data

Call outcome

non responsive to contact/no show

Final call date

01/12/2024

Final surrender outcome

not applicable

Close ticket

yes