

Dog Foster Application

Date:	
Name:	
Address:	
Phone:	Alternate (cell/work):
Secondary caretaker phone:	
E-mail:	
Employment:	Spouse/Partner Employment:
Please tell us about your work schedu	ule(s):
How long will the dog(s) be left alone	e most days?
	in your home (including children with ages and anyone else who lives
Are all of the people living in the hom	ne agreeable to fostering? yes no
Do you currently have a veterinarian?	? yes no
If so, please provide contact informat	ion (name, city, phone):
Would you describe your vet as: mo	odern sophisticated average simple not very high-tech
Do you have access to an emergency	vet clinic or specialty clinics? yes no

Please provide two references (people who know you well and are willing to verify your ability to properly care for a foster animal).

Address

How long have you

Full name

Phone

Please tell us a little about yo	our home and yard.				
•	g (house) apartment	townhouse	Circle one:	rent	own
Is there a pool on your prope	erty? yes no	If yes, is the pool o	enclosed by fencing?	yes	no
Is your house close to a main	n road? yes no		Close to neighbors?	yes	no
Do you have fencing? yes	s no				
If yes, please describe (as me	etal, wood or other?)				
If yes, is your fence attached					
Surrounding front yard, back					
Number of gates?					
Approximately how much ya					
Is it in good repair? yes	no	Could a dog go und	der or over it easily?	yes	no
If you don't have a fenced ya	ard, how will the dog exe	rcise and relieve itself? _			
If you rent, does your landlo	ard allow nets and know t	that you are fostering?	yes no		

Name and phone number of landlord:

If you presently own other pets, please list and describe them here. (Use the back if you need more space.)

Breed/type of animal	Age	Sex	Spayed/neutered?	How long have you had this pet?

Are **all** dogs in your household current on **all** recommended and/or required vaccinations? yes no We will need proof of this before placing a dog with you.

How do your current pets react to other dogs?
Are your dogs obedience trained? yes no
What kinds of medical conditions have you had experience handling (seizures, diabetes, heartworm, deafness
blindness, ear infections, etc.)?
Do you travel often?
Are there any dates in the near future when you will not be available?
Who cares for your pets when you are not home?
Why do you want to foster?
How long can you generally commit to fostering a dog? days months other
Where will the foster spend most of its time? inside outside both
Are you familiar with crate training? yes no
Do you have a crate available for use with your foster dog? yes no
Where will the foster sleep at night? on the bed loose crate confined to a specific area other
Where will you keep your foster when no one is home? house kennel yard exercise pen crate
confined to a specific area basement/garage

Are you aware that your foster may be an adult with an unknown history and no prior training? yes no Have you had any experience introducing new adult dogs into your household? yes no If yes, please describe how this was accomplished:
Are you aware that your foster may chew, dig, bark, jump, or display other undesirable behaviors while in your care? yes no
Are you willing (and able) to work with your foster dog in areas such as basic obedience and house training? yes no
Although we always disclose any known behavior and/or aggression issues about a dog – are you willing to accept the risk of a dog bite to yourself, another person or another animal while a foster dog is in your care?
Are you willing to supervise any children under 10 around your foster dog at all times? yes no
Please describe the type(s) of foster dog(s) you are willing to have in your home, e.g. seniors, puppies, pregnant, intact (until neutered) males or females, special needs dogs – and describe what types you would definitely not want.
How many dogs are you willing to foster at one time? (On occasion, there may be a pair who need to remain together if possible.)
Is there a preferred activity level for a dog you would want to foster?
Please describe your level of experience as a dog owner. Provide an honest assessment of your abilities to recognize and deal with any problem behaviors a foster dog might exhibit. Mention any experiences you may have had (e.g. barking, growling, possessiveness of food/toys, chewing, digging, jumping, etc.):
Foster applicant signature:

Date: _____