

FOSTER HOME APPLICATION

NAME:

ADDRESS: _____ CITY _____

POST. CODE: _____

PHONE: _____

E-MAIL: _____

PLACE OF WORK: _____

NAME OF EMPLOYER:

NAMES/NUMBERS OF 3 PEOPLE WHO WILL ALWAYS KNOW HOW TO CONTACT YOU:

Name: _____ Relationship: _____ Ph: _____

Name: _____ Relationship: _____ Ph: _____

Name: _____ Relationship: _____ Ph: _____

What makes you want to foster a pet now?

What kind of Pets do you have now?

What kinds of pets have you had?

What happened to them?

What is the longest you have owned a pet?

Do you know how to crate train a pet? YES NO

Do you know basic dog obedience training? YES NO

Please explain any experience you have had training animals

Do your current pets have microchips/licenses/identification? YES NO

Are they vaccinated and altered? YES NO

Do you have children? YES NO

Ages of Children?

Are your children trained to handle animals gently? YES NO

Will your children be closely supervised with the foster dog? YES NO

Who will be the primary caregiver for the foster dog?

Who will feed/water and walk the foster dog?

Is everyone aware of the amount of time and attention a dog needs? YES NO

What is the family schedule like?

How long will the foster dog be left alone?

Where will you keep the dog when no one is home?

Do you live in a house/apartment/other?

Do you rent or own? _____ If renting, do you have permission?

Do you have a secure fenced area for the foster dog? YES NO

What type of area?

**BY SUBMITTING THIS APPLICATION YOU ARE CERTIFYING THAT ALL
OF YOUR ANSWERS ARE TRUE AND CORRECT**