



Animal Welfare Foster Program Foster Application

You must be 18 years or older to foster

Name: _____ Spouse's Name (if applicable): _____

Occupation: _____ Spouse's Occupation (if applicable): _____

Employer: _____ Spouse's Employer (if applicable): _____

Your Address: _____

Cell Phone: _____ Okay to text? Y N

Other Phone: _____

Email: _____ (NOTE: e-mail and text are the main communication methods used)

When will you be available to start fostering?

Immediately upon application approval. (NOTE: Entire application process may take 1-2 weeks)

Specific date and why: _____

Please select *all* of the following options that describe your willingness/availability?

Long-term Foster – I want to take care of an animal full term until he or she gets adopted

Temporary/Short-term Foster – Contact me when an animal needs somewhere to go temporarily (when long-term fosters go out of town, emergency intakes, etc.)

Can stay with me over holidays – I can keep my foster dog when I take vacations and over holiday breaks

Can NOT stay with me over holidays – I'll need someone to take care of my foster dog when I go out of town. Please note all the times when you're expecting to need a puppy-sitter: _____

Why are you considering fostering an animal?

What type of animal are you willing to foster? Include explanation when necessary

Age/size range:

Male/Female/Either:

Hair Length:

Any breed restrictions?

Please describe some personality traits of the kind of animal you wish to foster.

What expectations will you have of this animal upon entering your home?

What will you do if the dog soils the floor/crate or chews on furniture?

Under what circumstances would you consider giving up your foster animal? *If at any time a home cannot continue fostering an animal, an AAFP officer must be notified immediately.*

Will you be able to medicate the dog (monthly chewables, topical flea/tick prevention, etc.)? YES NO

Will you be able to transport the dog (vet appointments, adoption events, etc.)? YES NO

Are you willing to housetrain? YES NO

Are you willing to use a crate for the dog if recommended? YES NO

In your opinion, what behaviors or symptoms warrant medical attention?

Please list all previously owned pets *(any dogs, cats, birds, horses, small caged animals, etc.)*

Include:	Name	Breed	Age	Spayed/neutered? (Y/N)	Vaccine Status?	Years Owned	Where Are They Now?
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Please list all currently owned pets that reside at your residence *(dogs, cats, horses, caged animals etc.)*

Include:	Name	Breed	Age	Spayed/neutered? (Y/N)	Vaccine Status?	Date Obtained
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*If there are any other animals living in your home, please list them and who they belong to here as well

Please provide the name and number of the veterinarian who cares for your current animals:

Describe briefly how your current animals spend the majority of their time.

Have you ever had to give up a pet? YES NO (If yes, please explain)

Have you ever lost a pet to illness or injury? YES NO (If yes, please explain)

Have you, any members of your family, or any members of your current household ever been charged with animal neglect, abandonment, or cruelty? YES NO

Please list all parties that reside in your home (roommates, family, children, etc)

Include:	Name	Age	Relationship to Applicant	Will they be a primary caregiver to the foster pet? (Y/N)
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Does your entire household know that you are considering fostering a pet? YES NO
If no, why not?

Does your entire household agree to the responsibilities of a foster animal in their house?
Such as: assisting you as needed, maintaining animal control via leash or carrier, providing basic needs, or providing appropriate exercise/attention? YES NO

Does anyone in your household have allergies to dogs? YES NO If yes, please explain: _____

Does anyone in your household have a fear of dogs? YES NO If yes, please explain: _____

Your home is a: House-rural Mobile home Duplex Other: _____
 House-suburban Apartment Condo Townhome

Describe your home's activity level:
 Busy /noisy/young children Moderate comings/going Quiet/occasional guests

Where will the foster spend the majority of its time during day and night?
 Inside Outside About equally inside and outside

If the foster is outside other than for supervised activities describe what shelter would be available:
 Shed Doghouse Dog door/Able to get inside on own
 Covered area (porch, etc.) Shade tree Other (explain): _____

How many hours per day will the foster be left alone?

When you are not home the foster will be:
 Loose inside Loose outside Tied/chained outside
 Crated inside Confined to one room Fenced area outside
 Garage Other (describe): _____

When you are home the foster will be:

- Loose inside Loose Outside Tied/chained outside
 Crated Inside Confined to one room Fenced area outside
 Garage Other (describe): _____

Where will the animal sleep at night when you are home?

How will your foster dog be exercised?

Describe your yard:

- Fully fence Kennel run No fence No yard Other (describe): _____

If fenced:

What type of material (wood, chain-link, etc.)?

What is the approx. height?

Many of our dogs may try to escape; do you consider your fence to be completely secure?

While outside in a non-fenced or non-secure area, are you willing to keep your foster dog on-leash at all times? YES NO (If no, please explain)

Do you own or rent your residence? Rent Own

If renting, do you have your landlord's permission to have pets? YES NO

How many? _____ Is there a weight/size/breed restriction? _____

Is there a fee required? YES NO ***NOTE:** If yes, you must be willing to pay it
AWFP cannot pay additional apartment fees

How long have you been at your present address?

If renting, please provide your landlord's name and number: _____

Provide **three references that you have known for more than one year** (Please include a parent if you are college age)

	<u>Name</u>	<u>Relationship/How long Known</u>	<u>Phone</u>
1)			
2)			
3)			

By signing below, I acknowledge that I completely read this application, comprehend it fully, know that applying does not ensure approval, and that untruthful answers or failure to comply with the requirements of this application or the foster home contract can result in the forfeiture of any AWFP animal fostered by me. I certify that the above information is correct, and I understand that the information will be verified.

Signature: _____

Date: _____

Drivers License #:

State:

Expiration:

NOTE: YOU ARE NOT PERMITTED TO TAKE YOUR FOSTER DOG TO THE DOG PARK (WITHOUT PERMISSION FROM THE FOSTER COORDINATOR)