APPLICATION AND QUESTIONAIRE FOR FOSTER OR ADOPTION

Thank you for your interest in fostering or adopting a cat/dog from Golden Years Dog Sanctuary. Please complete the following application. Return to GYDS with a copy of a valid ID and pictures of your home and yard..

PERSONAL INFORMATION (Please print):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone \_\_\_\_\_\_\_\_\_\_\_\_Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOUSEHOLD INFORMATION:

How many people are in your household? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adults Names, Relationships, and Ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Children Ages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does anyone in the household have allergies to dogs? YES NO cats? YES NO

Do all household members agree to you fostering pets? YES NO

Do you live in: HOUSE APARTMENT CONDO DUPLEX MOBILE HOME

Do you: OWN RENT LEASE

How long have you been at this address? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If renting/leasing, are there pet restrictions? YES NO

If yes, what are they? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Landlord’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Landlord’s phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe your yard:

No yard Unfenced yard Partially Fenced Yard Completely Fenced Yard

Height of fence: \_\_\_\_\_\_\_\_\_\_\_ Material of fence: Wood Chain Link PVC Brick

Do you have stairs leading to your home? Yes No If yes, how many \_\_\_\_\_\_\_\_\_\_

Do you have stairs in your home? Yes No If yes, how many \_\_\_\_\_\_\_\_\_\_

Do you have a pool? YES NO. f yes, is it fenced from the rest of the yard? YES NO

Do you already have dogs or cat(s)? YES NO Number of Dogs\_\_\_\_\_ Cats \_\_\_\_\_

Are your pets spayed/neutered and up to date on vaccinations? YES NO

Please list all pets below: (use additional paper as necessary)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| SPECIES | BREED | AGE | SEX | ALTERED? | VACCINATED? |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

How would you describe your level of experience with dogs: (check all that apply)

* Never had a dog
* Had one or more dogs as an adult
* Have experience with behavioral problems
* Have experience working in a veterinarian hospital
* Have experience or are a dog trainer
* Have previous Foster experience
* Had dogs in my childhood
* Have experience with “bully” breeds

Is your experience with: Small Medium Large dogs (circle all that apply)

What breeds have you owned/worked with: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where will the foster dog/cat spend most of its time? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many hours of the day will the dog/cat be left alone? \_\_\_\_\_\_\_\_\_\_\_\_\_

Where will the dog/cat sleep? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where will the dog/cat be when left alone? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you comfortable with any of the following (check all that apply)

* Not housebroken
* Giving medication
* Excessive Barking
* Not good with cats
* Separation anxiety
* Needs additional obedience training
* Not good with other dogs
* Deaf or blind

Are you able to transport the dog/cat to and/or from the veterinarian, an adoption event, or our facility? YES NO

Do you understand that by fostering you agree to care for the dog/cat for an undetermined amount of time, depending on the health of the animal and/or our ability to place him/her in a permanent home? YES NO

Do you agree to foster the dog/cat until such time that we can either place the dog/cat or have room at our facility? YES NO

Do you understand that it is not required, but it is our goal for fosters to adopt their dogs once medical issues have been resolved and the dog is part of your home? YES NO

Have you ever been investigated, arrested, or convicted of animal neglect or cruelty? YES NO If yes, explain:

Why do you want to foster? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide the name, relationship and contact information of one reference not in your immediate family or household.:

Please provide the name and contact information of your veterinarian:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If accepted as a Foster or Adopter, you will be required to complete and sign a foster and/or adoption agreement. Thank you for taking the first step to saving a life!

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of applicant Date