Hobo Haven Pet Rescue Foster Questionnaire

*Name of Applicant:*

*Daytime Ph # Evening Ph #  
 Address: City:   
Email:*

**Fostering a pet is a serious responsibility that requires a long-term commitment. It is the goal of Hobo Haven Rescue to be sure that this responsibility, as well as the physical and psychological needs of each pet, be met in it’s foster home. This foster application has been designed to help prospective fosters address the impact that fostering can have upon their home, and to assess the suitability of their home for a foster pet.  This form shall also aid HH in applicant evaluation and screening in order to select the best placement for each pet’s individual needs.**  
**Please submit your completed form to hobohavenpetrescue@gmail.com**

1. Have you applied or ever fostered a pet through another rescue organization?   
   If yes, which rescue organization?

\*Please provide contact names/email/phone numbers of any rescues you have previously fostered for

1. Why do you wish to foster?

What do you feel you have to offer a foster dog?

What are your expectations of your foster dog?

1. What length of time are you willing to commit to a foster pet?   
   Daily\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How long would you be willing to foster each pet?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
   Are you aware that we have no way to know how long a pet will remain in foster care?
2. **Who will be responsible for their primary care and training?**
3. Do you presently have a dog/cat/pet? How many pets?
   1. If so, what breed(s)?
   2. Neutered/Spayed?
   3. If not spayed or neutered, please explain why:
   4. Date of last vaccines? Last checkup:
   5. Do you do heartworm testing? Last HW test? prevention?
   6. Male/female?
   7. Animal friendly? Any issues with other dogs?:(please explain in detail)
   8. How old? Current dog license in your municipality?
4. Have you had dogs in the past?
5. If so, what breed?
6. Please explain in detail what happened to them:
7. Have you ever given away/ surrendered or rehomed an animal, or has your pet every been picked up as a stray/gone missing? What were the circumstances?
8. Describe your typical daily routine in regards to how a pet would fit into it.

Please include both pre-COVID and post-COVID routines in addition to current.

1. **How would you describe your household activity level?**

**Very quiet**

**Rather easy going**

**Usually something going on**

**Lots of activity**

1. In addition to regular life at home, would your foster pet:   
   Walk routinely with a family member?   
   Go to your place of business with you?

Travel with you? If not, what provisions will you make for them when you travel?   
Please note that we do not permit pet sitters or family to care for our dogs if you are not able to as they have not been screened/approved by our rescue.  
  
Do you have any vacation plans coming up (within 6 mos), weekends away or other times that you would not be available to care for your foster pet?

We do not have available alternatives for foster dogs to be moved to, so if you are planning to be away within the next 3-6 months, we will need to know so that we do not place a dog in your home in that time frame.  
Be a playmate for your children or pets?

Do you intend to visit dog parks with your foster dog?

1. Are you able to be committed to taking care of the dog/cat for however long it takes to find an appropriate forever home/become adopted?

1. Are you willing to give a dog a good long walk at least 2-3 times a day, everyday? In addition to regular bathroom breaks.

How many walks are you willing to provide: Duration/Distance?

What time do you usually wake up/get up in am?

1. Will the dog be housed outside at any point?

Will the dog be outside alone at any point?

1. **Do you understand the importance of keeping dogs on leash 100% of the time when outdoors and that new dogs are a high flight risk?**
2. How many adults are there in your household – **please list their ages**?
3. How many children \*incl teenagers– **please list their ages**?
4. Which describes you best?

Work full time ­­­­\_\_\_\_\_\_

Work part time \_\_\_\_\_\_

Student\_\_\_\_\_\_

Self Employed/ Work from home\_\_\_\_\_\_

Not working \_\_\_\_\_\_

1. Are there any tenants or additional people residing in your home?
2. Who will be responsible for walking the dog?
3. Does anyone in the household smoke/vape? Indoors? Outdoors? In vehicle?
4. Is everyone in the household interested in and committed to the responsibilities of having a foster animal in the home?
5. Does anyone in your home suffer from pet allergies?
6. How many hours will this dog/cat be left alone at home usually?   
   Where will the dog be when home alone?
7. Do you ever encounter situations that would keep you at work/away from home longer than expected?
8. Do you live in a house, a townhouse, condominium, or apartment?
9. Do you have a yard?   
   If so, please describe the type of fencing and approximate height, and indicate whether or not it is fully fenced with a latching/ proper gate. (this will be verified during your home visit inspection)  
   A pool?
10. If you live in an apartment/ condo, do you have a balcony?
11. Do you own or rent your residence?
    1. If rented, are pets allowed in your residence?

Landlord name/contact info if rent:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Pls initial indicating consent to contact your landlord to verify that pets are approved in your building\_\_

1. Do you anticipate change of your lifestyle and/or family situation in the near future?
2. Do you have any dog training knowledge?
3. What training schools/ methods have you previously used?   
   \_\_\_pls initial indicating consent to contact previous trainers that you have worked with.
4. Are you willing to invest time to take the pet to vet appts, weekly training classes or meet/greet appts if necessary? This includes transporting the pet to our rescue vet locations located in Listowel/Arthur areas.

Adoption meetings typically take place in St Jacobs.

1. Are you familiar with crate training? If not, would you be willing to learn more about it and use a crate (portable cage) as a training and transitional aid?
2. What issues have you had during past experiences with animals that have caused you difficulty? (i.e. behavioural or medical)

How did you manage these issues?

1. ***Scenario****: You’ve just come home from a long day at work and your foster pet has pulled apart the kitchen garbage. What do you do?*
2. ***Scenario:*** *You come home and see that your foster pet has had an accident on the floor. What is your response?*
3. ***Scenario:*** *You’re walking your foster dog down the street and it sees another dog being walked down the road. He/she gets quite worked up and starts pulling hard on the leash, growling and/or barking. How would you handle the situation?*
4. **Scenario:** *You are noticing that your foster pet has started to be possessive about his food and toys. How would you manage this behaviour?*

1. Are you aware of the requirements for providing both safety and quality care of a dog?

Please specify:

1. Do you have/ did you have a veterinarian, and if so may we contact him/her for a reference? If you have used multiple vets in the past 10 years, please provide contact information for all of them.

Name of Veterinarian/Clinic: Phone:

1. Do you have/ did you have a dog groomer, and if so may we contact him/her for a reference? If you have used multiple groomers in the past 2-3 years, please provide contact information for all of them.

Name of Groomer/facility: Phone:

1. Please provide the names and phone numbers for 2 personal references who have direct knowledge of your experience and ability to care for pets (no family members):

If you are emailing us from a work email address, please provide a personal email address:

Do you have any physical or mental illnesses or impairments that may affect your ability to provide quality of daily care for the dog?   
Please explain (this merely assists us with placing an appropriate dog with each foster home. Those who suffer high anxiety would not benefit from having very loud/hyper dogs for example, those with physical limitations would be matched with a dog who is appropriate for their needs. This question is necessary for us to be able to ensure that your foster dog is able to be managed within your specific limitations) :

**I understand that in order to complete processing of this Hobo Haven Foster application, a visit to my home will need to be scheduled by a representative of the program, and that by submitting this application I agree to such a scheduled visit and that all members of the household will be present at that time, including all pets.  
  
I also agree that the rescue organization may contact the listed veterinarian, trainer, groomer and landlord if applicable, for additional information.   
I authorize those listed to disclose any information (medical or otherwise) requested by the representative.   
I also certify that all information on this adoption application is true and correct.**

**Yes, I agree Initial No, I do not agree Initial**

Applicant’s name: Date:

Co-applicant (if applicable) Date:

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_