



## *Foster Application*

### **PERSONAL INFORMATION**

Applicant: \_\_\_\_\_ DL# \_\_\_\_\_

Are you at least 21 years of age?

Co-Applicant: \_\_\_\_\_ DL# \_\_\_\_\_

Are you at least 21 years of age?

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

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

Phone: (H): \_\_\_\_\_ (W): \_\_\_\_\_ (C): \_\_\_\_\_

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

Which do you prefer to foster    Adult Dogs    Puppies    Nursing dog Moms w/ Puppies

Do you prefer a certain size dog:    S    M    L    XL

Any specific breed experience? \_\_\_\_\_

Have you ever fostered for another Humane Society or Rescue organization?

If yes, provide their name, address and phone number: \_\_\_\_\_

### **EMPLOYMENT INFORMATION**

Applicant  
Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Years: \_\_\_\_\_

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

If less than one year, name and address of previous employer: \_\_\_\_\_

Co-Applicant  
Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Years: \_\_\_\_\_

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

If less than one year, name and address of previous employer: \_\_\_\_\_

**HOUSEHOLD INFORMATION**

How many people in your household? \_\_\_ What is their relationship to you? \_\_\_\_\_

If there are children, what are their ages and gender? \_\_\_\_\_

Does anyone in the household have allergies? Explain: \_\_\_\_\_

\_\_\_\_\_

Describe the general activity and noise level of your household: \_\_\_\_\_

Who is home during the day? \_\_\_\_\_ Do you operate a home day care?

What are your work hours? \_\_\_\_\_ Co-Applicant: \_\_\_\_\_

**INFORMATION ABOUT YOUR HOME**

Do you own your home? If renting, does your lease permit dogs? (Include copy in submission)

If renting, please provide the name and phone number of your landlord: \_\_\_\_\_

How long have you lived there? \_\_\_\_\_ If less than two years, give previous address:

\_\_\_\_\_

Do you plan on moving soon? If Yes, where and when? \_\_\_\_\_

What is your lot size? \_\_\_\_\_ Is it fenced? Height \_\_\_\_\_

Where will you exercise your dog while on a leash? \_\_\_\_\_

Where will you exercise your dog while off a leash? \_\_\_\_\_

**YOUR FOSTER'S ACCOMMODATIONS**

Where will the dog be during the day? \_\_\_\_\_ At night? \_\_\_\_\_

When you are away overnight (boarding, house sitter, etc.)? \_\_\_\_\_

How do you plan to confine the dog when you are away from your home daily? \_\_\_\_\_

Will there ever be a time when the dog will be left outdoors when no one is home? \_\_\_\_\_

Please explain: \_\_\_\_\_

Will you crate train your dog? \_\_\_\_\_

Are there any unusual circumstances to which the dog will have to adapt? \_\_\_\_\_

Please explain: \_\_\_\_\_

Are there any canine behaviors you are not willing to tolerate? \_\_\_\_\_

Please explain: \_\_\_\_\_

What activities will your dog have? \_\_\_\_\_

**YOUR PERSONAL FEELINGS ABOUT FOSTERING**

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

\_\_\_\_\_

How long are you willing to foster? \_\_\_\_\_

\_\_\_\_\_

Other comments:

**CURRENT OWNERSHIP EXPERIENCE**

Do you own/have current dogs in the home?

Do you own/have current cats in the home?

Name	Breed	Age	Sex	Spayed or Neutered?	If No, why not?	# of years you had pet	What happened to pet?

**Note: It is our policy that all household pets must be altered prior to fostering.**

Have you ever taken a dog through pet training class?                      Where? \_\_\_\_\_

When? \_\_\_\_\_ How many levels? \_\_\_\_\_

Please describe the type of training that was utilized at the class you attended: \_\_\_\_\_

\_\_\_\_\_

What skills were taught? \_\_\_\_\_

Did you agree with the training methods utilized at the training class?

Please explain \_\_\_\_\_

If you have never taken a dog through pet training class, are you willing to?

**REFERENCES**

Veterinarian

What Veterinary Clinic do you use? \_\_\_\_\_

Veterinarian's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Are your current animals up to date on vaccinations?

**PERSONAL REFERENCES**

Two local individuals (not related to you who knows or has known your other animals (if possible, one of whom is a neighbor).

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

May we visit your home? \_\_\_\_\_ When is a good time to visit? \_\_\_\_\_

**ABOUT YOUR AUTHORIZATION:**

**I understand:**

- Safely Home Canine Rescue, in an effort to ensure the best possible foster home for a pet, has the right to deny any application. Additionally, we have the right to conduct a home visit or telephone interview prior to the fostering and/or during the fostering to verify the wellness and safety of the pet.
- The foster must be present and must be at least 21 years of age with proper proof of age
- Safely Home Canine Rescue, in an effort to ensure the best possible foster home of a pet, has the right to confirm the information provided on this form, including contacting landlords, references and veterinarians

By signing below, I am confirming that I have read and understand the terms of this foster application.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant's Signature

\_\_\_\_\_  
Date

Any falsifications or misleading statements on this form will result in a dismissal of your application.

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