

Foster Parent Application

Name:				
Email:				
Birth Date:				
D () T	MM	DD	YYYY	
Preferred Telep	hone:			
Secondary Tele	phone:			
			ng in the household:3	
f children unde have dog exper	r 18 years of a ience? (Y, N, N	ge will be aroui	nd a foster dog, does he	
Have you previ	ously fostered	an animal? (Y,	N)	
If yes, with wha	ıt organizatioı	n and when?		
When are you a	vailable to stai	rt fostering a do	og?	
Are you interes	ted in: (Checl	k all that apply)		
C Fostering to	Costor			

© Emergency Fostering
Special Needs Fostering (Abuse cases, puppy mill rescues, etc.)
How long have you lived at your current address?
Do you Own or Rent?
If Rent, do you have permission to have a dog?
If Rent, please provide your landlord's name and phone number:
Any weight or breed restrictions by your landlord or homeowners' insurance?
Will the dog be allowed in the house? (Y/N)
How long daily will the dog be left alone (without human company)?
Where will the dog stay when you are away from the house?
Are you familiar with the use of a dog crate to train your pet during your
absence or at night? (Y/N)
Is your yard fenced? (Y/N)
If yes, type of fence and height of fence:
Approximate square footage of fenced yard
How will dog be exercised?
Does your schedule allow time for formal obedience training with your foster dog if it should be needed?
Why are you interested in fostering a dog?

Doe everyone in your household in agree about fostering a dog? $(Y/N)_{}$
Does anyone in the household have any animal allergies? $(Y/N)_{}$
If yes, please explain:
Please give a brief description of your previous dog experience:
Please describe what you feel would be the perfect foster dog for your lifestyle:
Please select the following in which you are able to accommodate with your foster dog:
Socializing Physical Therapy Giving Medications Medical Needs Behavior Issues Puppy Mill Rescues Potty Training Crate Training Basic Obedience Bathing
If you have other accommodations you can make, please describe:
Please list any animals currently living in your household:

Are all the animals in your care living harmoniously, or are there behavioral
issues? Please explain:
Are all of the animals in your care spayed/neutered, and up to date on shots?
If not, please explain:
CURRENT OR PREVIOUS VETERINARIAN:
Please list your current animal care provider, or a previously used clinic.
Clinic Name:
Veterinarian Name:
Address:
Phone Number:
Are your animals currently on heartworm preventative:
Where do you purchase heartworm preventative:
I attest that the information provided is true and accurate to the best of my knowledge.
Signature Date

Congratulate yourself on being an extraordinary person! It's easy to say you want to help, but by taking a needy animal into your home you are making a difference. Your commitment to help enables us to rescue more dogs. Thank you!