

**GERMAN SHEPHERD RESCUE OF NEW YORK, INC.**  
**P.O. BOX 242, DELMAR, NY 12054 GSRESCUENY@GMAIL.COM**

**DOG FOSTER APPLICATION**

**APPLICANT INFORMATION**

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

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

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

E-Mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Which number is best to reach you? \_\_\_\_\_ What is the best time to call? \_\_\_\_\_

Rent or Own Your Home: \_\_\_\_\_ Length of time at this address: \_\_\_\_\_

If you Rent, is there any restriction on having a dog(s)? \_\_\_\_\_

\*\*\* Please have your landlord complete and sign the Landlord Consent Form. You must request the form from us by email: gsrescueny@gmail.com and submit the form WITH your application.

Not Including Yourself and Spouse/Partner, Please List every other adult and child that resides with you or spends significant time in your home (more than 12 hours in any two week period)

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

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

Any additional persons, please list on the back of this sheet and place a checkmark here \_\_\_\_\_

**EMPLOYMENT**

Your Employer: \_\_\_\_\_

How Long Employed There: \_\_\_\_\_ Phone: \_\_\_\_\_

(If Self-employed, write "Self-employed" & Business Name)

**REFERENCES**

Please provide the name, address and phone number of three references:

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1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**PROPOSED FOSTER HOME SETTING**

Type of Setting: City/Urban - Suburban - Country/Rural (circle one)

Type of Home: Single Family Home - Apartment - Condo - Mobile Home - Other (specify):

\_\_\_\_\_

Activity level at home? Very Active Active Quiet Very Quiet Non-Active

Does your home have a yard? \_\_\_\_\_ Does the yard have a fence? \_\_\_\_\_

Height of Fence: \_\_\_\_\_ Type of fence: \_\_\_\_\_

Is fence secured underground (so dog can't dig under it)? \_\_\_\_\_

Is any gate to be locked at all times with a padlock? \_\_\_\_\_

If your yard has a pool, is the pool fenced in and inaccessible to the dog? \_\_\_\_\_

How much time will the dog spend outside? \_\_\_\_\_

Is someone home during the day? \_\_\_\_\_ If no, where will the dog stay while you are gone?

\_\_\_\_\_

How long/how often will the dog be alone? \_\_\_\_\_

Where will your dog be kept most of the time? (Please circle)

In house - Outside - Basement - Other (specify) \_\_\_\_\_

If kept outside, will you have a dog run/dog house? \_\_\_\_\_

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

Do you have a dog door in your home? \_\_\_\_\_ Do you have a crate? \_\_\_\_\_

Are you willing to crate train the dog and/or continue crating and/or crate training if already started? \_\_\_\_\_

What is your plan for exercising the dog, and how often? \_\_\_\_\_

\_\_\_\_\_

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What is your plan for disciplining and correcting the dog generally?

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Specific Discipline: How would you discipline the foster dog for a housebreaking incident?

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How would you discipline the foster dog for a chewing, scratching/digging, damaging of your property incident? (e.g. shoes or furniture)

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**Foster dogs come to GSRNY in need evaluation from their time in foster care, at which time, behavior is noted and worked on. Are you willing and agree to report this information daily and help train through the guidance of GSRNY to help prepare the dog for their forever home? Yes  No**

Level of Training you are comfortable with: (Circle one)

Easy            Moderate            Intermediate            Challenging            Difficult

Your comments if any, to help us consider your training comfort level:

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**OTHER PET INFORMATION**

Do you have any other pets? \_\_\_\_\_ (Use the back of this sheet if necessary to expand info) For each pet list: Name, Breed, Age, Sex, and Length of Time you have had the pet:

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Are your other pets current on all vaccinations? \_\_\_\_\_ If no, please explain. (use back)

Are your other pets spayed/neutered? \_\_\_\_\_ If no, please explain. (use back)

Are your other pets on heartworm preventative? \_\_\_\_\_ What type? \_\_\_\_\_

Are your pets on Flea/Tick preventative? \_\_\_\_\_ What Type? \_\_\_\_\_

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Are you willing to pay for a heartworm test for your other pets? \_\_\_\_\_

For each other pet listed above: Please attach a copy of each of your current pets' medical record summary sheet(s) from your Veterinarian, including all vaccinations with dates administered and expiration dates, if applicable.

**VET INFORMATION, Vet Check & References**

Current Veterinarian's Name, Address & Phone Number:

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

**X** \_\_\_\_\_ Initial here that you have called your vet office to give permission to speak with a GSRNY Representative.

**REFERENCES**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**CONDITIONS PERTAINING TO THIS PROPOSED FOSTER**

Have you ever owned a German Shepherd Dog? \_\_\_\_\_ When was the last time? \_\_\_\_\_

Do you have a preference for a male or female German Shepherd Dog? \_\_\_\_\_

Age range preference, if any: \_\_\_\_\_

Why do you want to foster a Germans Shepherd Dog? \_\_\_\_\_

\_\_\_\_\_

Have you ever fostered a dog before? Yes No If yes, which Rescue? \_\_\_\_\_

\_\_\_\_\_

Breed of Dog(s)? \_\_\_\_\_ How long was each foster? \_\_\_\_\_

How soon are you available to foster? \_\_\_\_\_

Who will be primarily responsible for the Foster Dog? \_\_\_\_\_

Would you be comfortable administering medication to the Foster Dog if necessary? \_\_\_\_\_

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How did you hear of German Shepherd Rescue of NY?

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List any Humane Societies, Organizations, Breed or Training Clubs you are associated with and what your affiliation is with each of them:

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We will provide you with as thorough an evaluation of the temperament of any dog we have to place, as far as is practicable. Please initial here to show that you agree and understand that the complete history of a dog may not be known and that behavioral problems could be encountered which have not been discerned to date despite GSRNY's best efforts  \_\_\_\_\_

Are you willing to work with this dog and GSRNY on correcting these problems? \_\_\_\_\_

**RESPONSIBILITY FOR GSRNY DOGS**

Each GSRNY Dog is carefully chosen and welcomed into GSRNY by the Director of GSRNY and Board Members/Team. Each dog is a top priority to us. Safe, knowledgeable, loving Foster homes are essential to our program. By becoming a foster and providing a foster home for German Shepherd Rescue of NY, you agree to care for, keep safe, and report to gsrescueny@gmail.com any and all updates every couple of days while our dog is being cared for by you, the foster.

**TRANSPORT OF GSRNY DOGS**

**PLEASE PROVIDE when submitting application:** a copy of a valid NYS driver's license and provide proof of automobile Insurance, Approved "Foster" agrees to maintain a valid NYS license and Auto Insurance while fostering for German Shepherd of NY.

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ADDITIONAL COMMENTS/other information that may assist GSRNY in evaluating your application for this proposed Foster Application:

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GSRNY agrees not to use any information contained herein for purposes other than evaluating said applicant(s) and/or household members for the suitability of the proposed foster unless otherwise required by law.

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I certify that the information provided on this application is true, correct and complete. I understand that omission of information and/or failure to answer all questions can result in the application being denied. I also understand that if an omission, false or fraudulent statement herein is discovered after a Foster Dog is placed in my home, I accept that German Shepherd Rescue of NY has the right to annul the Foster Agreement, reclaim the Foster Dog and there shall be no refund, reimbursement or other payments made to me for expenses, if any, that I may have incurred during the course of this or any future foster. German Shepherd Rescue of NY has my permission to call my references, employer or others and to check any information on or in this application. If approved, this application shall become a part of our Foster Agreement.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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

PLEASE KEEP A COPY of both this application and the Foster Agreement for your records.

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**GSRNY REPRESENTATIVE SECTION/OFFICE USE ONLY:**

- NYS License provided: \_\_\_\_\_ Yes \_\_\_\_\_ No
- Proof of Automobile Insurance provided: \_\_\_\_\_ Yes \_\_\_\_\_ No
- Vet Office Reference Complete: \_\_\_\_\_ Yes \_\_\_\_\_ No
- Reference Check Complete: \_\_\_\_\_ Yes \_\_\_\_\_ No
- Foster Application Approval     Yes  No

PRINT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

**X** \_\_\_\_\_ DATE: \_\_\_\_\_

**Signature of Director or Representative of GSRNY**

**NOTE:**

1. The “Dog Foster Agreement” must be attached hereto as an integral part of the “Foster Agreement”.
2. GSRNY Signature is to be signed by a designated Board Member at the request of the Director, or signed by the Director ONLY. Any other signature is invalid for purposes of this Agreement.
3. If there is to be any additional adult(s), 18 or over in the “Foster” household that will have any responsibilities for the foster dog(s), they must also sign the “Dog Foster Application” and “Dog Foster Agreement”.