

**<Rescue Name>**  
**Foster Care Application**

Date \_\_\_\_\_

**Foster Care Provider Information**

Name:	Co-applicant:	
Address		
City	State:	Zip Code:
Telephone Number:	Cell Number:	
Email:		

**Employment**

Company Name:	Full Time	<input type="checkbox"/>	Part Time:	<input type="checkbox"/>
Company Phone:				
Are you a student? <input type="checkbox"/> If so, your age				
( You must be at least 18 years of age to foster an animal)				

**Housing**

House	<input type="checkbox"/>	Apartment	<input type="checkbox"/>	Townhouse	<input type="checkbox"/>	Condominium	<input type="checkbox"/>	Mobile Home	<input type="checkbox"/>
Do you yourself own this dwelling? (Y/N)									
If renting, you must provide a lease or other documentation indicating permission from your landlord/association.									
Landlord/association name and telephone number:									
Fenced Yard (Y/N)      Type of fence      Height of fence									
Number of adults in the home      Number of children in the home:									

## Pets

Do you have any pets now or have you previously owned any pets?

If yes, please list breed, age, sex, length of time owned

How was your pet obtained?

Any behavior problems?

Any dominance problems?

Any health issues?

Are your pets spayed/neutered?                      If no, please explain

What happened to previous pets?

Name and telephone number of your Veterinarian or clinic (please call them and give them permission to speak with us)

Name that the records are under

How long have you been looking for a dog or cat?

Why you are interested in fostering?

Have you fostered this type of animal before?

What research have you done on this type of animal?

Where did you obtain your findings?

Do you have any experience caring for a rescue animal?                      If yes, explain

## References

Please list below names, addresses, and phone numbers of two references. **These references cannot be family members or roommates.** These references will be called as part of our adoption process.

Name:

Name:

Address:

Address:

Phone:

Phone:

Relation to you:

Relation to you:

All of the information I have provided on this application, to the best of my knowledge, is true and complete. I understand that falsifying answers on this application, or at any other time during the adoption process, disqualifies me from adopting an animal through <Rescue Name>. By submission of this adoption application, I grant permission to <Rescue Name> to verify my information above through my landlord/association, if applicable and through my veterinarian. I, further, grant permission to my landlord/association and veterinarian to release such information upon request by an authorized <Rescue Name> representative.

The final decision as to whether an individual applicant can provide for the lifetime needs of an individual animal is the sole discretion of <Rescue Name>. <Rescue Name> reserves the right to refuse any applicant. <Rescue Name> foster care practices meet equal opportunity standards.