

Staff Use Only - Application Status

Vet checked Landlord checked

Approved Declined

Cruelty Case Foster Care Application

Your Name (first, middle, last)	Maiden Name	Date of Birth
Partner's Name (first, middle, last)	Maiden Name	Date of Birth
Street Address	Mailing Address	
City, State, Zip	City, State, Zip	
Home Phone	Work Phone	
Occupation	Company	
Driver's License Number & State	E-Mail address	
How long have you lived at this address?	Veterinarian (Hospital)	

I share my home with _____ adults and _____ children.

Ages of children: _____

I have children who visit or live next door. Ages: _____

Who will be responsible for the care of this animal while in foster care?

Myself Partner Both Children All

This animal will be left alone for _____ hours a day.

What types of animals have you or your partner lived within the last 5 years:

Name	Type	Age	Sex	Spayed/ Neutered?	Where is the animal now?



Do you own or rent?

What type of residence? Apartment Camp Condo House Trailer Farm

If you rent, please provide landlord's name: _____

Landlord's phone number: _____

I am willing to foster the following:

- Kittens Pregnant cat Adult cat
 Puppies Pregnant dog Adult dog
 Horse Cow Sheep Llama Pig Exotic Birds
 Goat Mini-horse Donkey Other _____

If willing to foster a dog/puppy, please fill out the following:

Do you have a separate room available for the foster dog to feel safe in? Yes No

If no, where will the foster dog be kept inside?

- Crated Room Basement Loose Tied

How will the foster dog have access to the outside? **(Dogs cannot be allowed to run loose)**

- Fenced yard Invisible Fence Tied Runner Walked

How do plan to discipline this dog? _____

Are you willing to enroll the foster dog in an obedience class if ACHS feels it is needed?

- Yes No

Are you willing to housebreak this dog? Yes No

If willing to foster a cat/kitten, please fill out the following:

Do you have a separate room available for the foster cat to feel safe in? Yes No

If no, where will the foster cat be kept inside? **(Cats are not allowed to go outside)**

- Crated Room Basement Loose

How do plan to discipline this cat? _____

If willing to foster a horse, cow, llama, sheep, pig, goat, or other farm animal, please fill out the following:

What kind of shelter will be available for this animal? _____

If the animal will be stalled, how many hours will it be inside? _____

Is there shelter for the animal while it's outside? Yes No

If yes, what kind of shelter? _____



What kind of fencing is used in and around the animal's area(s)? _____

Describe your water source: _____

Who will be caring for this animal? _____

If under 18, please give age: _____

What is your experience with these types of animals? _____

Are you able to carry out recommended veterinary treatments if necessary? Yes No

I give my veterinarian, _____, permission to release any and all medical information about my animals to this agency.

Are you able to cover the cost of food for the animal(s)? Yes No

(Agency covers veterinary expenses)

I am prepared to assume the responsibilities of fostering a pet, especially:

- Providing food, shelter, and water
- Providing appropriate care for the animal
- Returning the animal to the shelter at the appropriate time
- Communicating with the shelter staff about medical and behavioral problems

For the purpose of fostering, the undersigned certifies that the above statements are true and complete. This agency has the right to deny an application due to false information or what the staff believes is in the best interest of the animal.

Applicant's Signature _____ Print Name _____

Date _____ Agency Staff member _____

Landlord permission granted? Yes No Staff Initials _____

