

Paws Unlimited Foster Care Application

Please complete and sign the application

Name: _____ Date: _____

Names of other adults in the home: _____
 Relationship: _____

Age of all individuals (including children) in your home: _____

Address _____ City: _____ State: _____ Zip _____

Phone: _____ Cell: _____ Work: _____

How long have you lived at this address?
 If less than two years, please list your previous address:

Place of employment: _____
 Work schedule: _____

E-Mail Address: _____

Please indicate which best describe your current living situation:
 House, Condo, Apartment, or Mobile Home?

Do you? Rent, Own, or Live with parents:

If you rent, Landlord's name & phone: (required)

What type of environment? City, Suburban, or Country:

Do you currently own a pet? Yes No

What type (cat, dog, bird) and how many:

Are your current pets spayed/neutered? Yes No

Are your pet's vaccinations current? Yes No

How were you referred to Paws Unlimited? _____

What type/breeds of animals would you be interested in fostering? (Check all that apply)

- Cats Cats with kittens Pregnant cats
- Dogs (small, medium, large) Dogs with puppies Pregnant dogs
- Special needs animals (sick, injured, medical needs, etc.)
- Male Female Age range: _____
- Other: _____

Please check which level of foster care you would like to provide:

- Emergency (maximum of 1-2 weeks)
- Interim/Short term foster (maximum of 2-3 months)
- Long term care (up to 6 months- can be extended if chosen)

Do you have a yard? Yes No
 If so is it fenced and how tall?
 Is the fence gait locked? Yes No
 Is the fence secured underground as well? Yes No
 If you do not have a fence do you plan on putting once up? Yes No
 If so when and what type?

Do you have a homeowners or renters insurance policy? Yes No
 Name of insurance company: _____

Do you have a city or county ordinance that limits the number of dogs you are allowed to have in your home? Yes No
If yes, how many are you allowed to have?

Do you own a dog crate? Yes No

If so, what type and size:

Are you willing to purchase one? Yes No

Is someone home during the day? Yes No

If not, where will the foster animals stay while you are gone?

Where will the animal be kept most of the time? Inside, Outside, or Other?

Please specify if you have chosen other:

*Dogs are not to be chained or tied and left out at any time

Have you fostered any animal in the past? Yes No

If yes, what kind?

Through which agency (name, phone number)?

What are you willing to provide for a foster animal (food, shelter, training, activities)?

Are you willing to provide transportation to and from the vet, adoption sites, etc. as needed?

List any Humane Societies, Organizations, Breed, or Training Clubs you are associated with:

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

Reference 1:

Reference 2:

Additional comments:

Liability Waiver

I will provide my own automobile and health insurance, and hereby agree not to hold Paws Unlimited or any of its employees, volunteers, associates, or foster care providers liable for any physical, emotional, or property damages that are a direct or indirect result of activities involved in the placement, transport, grooming, training, or evaluation of Dogs/Cats in any way associated with Paws Unlimited. This includes any and all activities I perform as a Paws Unlimited, volunteer.

An evaluation of the area in which the animal(s) will be kept will be conducted prior to approval. This evaluation will be made as soon as is convenient by an official from Paws Unlimited.

Print Name: _____ Date: _____

Signature: _____ Date: _____

For office use only:

approved

denied

Reason:

Signature: _____ Date: _____