



**HOME SWEET HOME ANIMAL RESCUE  
FOSTER APPLICATION**  
Revision May 24, 2010

Please write/type in only the white spaces. YES/NO questions should be marked with an X.

**CONTACT INFORMATION**

<b>Your Name:</b>			
<b>Complete Address:</b>			
<b>Email Address(s):</b>			
<b>Phone Number(s):</b>	<b>Home</b>		
	<b>Work</b>		
	<b>Cell</b>		
	<b>Other</b>		

**HOUSEHOLD INFORMATION**

<b>How Many Persons In Your Household?</b>			
<b>Adults:</b>		<b>Names:</b>	
<b>Children:</b>		<b>Names:</b>	
		<b>Ages?</b>	
<b>Do other children visit your home?</b>			
<b>Ages?</b>			
<b>How Often?</b>			
<b>Is everyone in your household in agreement to foster a pet?</b>		<b>YES</b>	<b>NO</b>
<b>Will you be the primary caretaker of this foster pet?</b>		<b>YES</b>	<b>NO</b>
<b>If not you, explain below who will be its primary caretaker and the circumstances that lead you to being the one applying to be a foster parent.</b>			
<b>Have you owned a dog before?</b>		<b>YES</b>	<b>NO</b>
<b>Do you currently own any pets?</b>		<b>YES</b>	<b>NO</b>

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Current Pets						
Name	Species	Breed	Age	Sex (m/f)	Altered (y/n)	
Please explain what happened to all <b>PREVIOUSLY</b> owned pets and the circumstances of why they are no longer with you (passed away, re-homed, etc)						
Previous Pets						
Name	Species	Breed	Age	Sex (m/f)	Altered (y/n)	Reason

**VETERINARY REFERENCE**

Please list your current veterinarian or one you have used in the past.			
Name:			
Address			
Phone			
Length of Time Used:			
If you currently own a dog(s), is she/he currently on Heartworm Prevention?			
		YES	NO
If no, why not:			
Are your pets current on all vaccinations?			
		YES	NO
If no, why not?			
<p>Kennel Cough is an upper respiratory infection that is the most common illness we encounter with dogs pulled from high-kill shelters. Therefore, the BORDATELLA vaccination is <b>STRONGLY RECOMMENDED</b> for your own dogs. FYI: Bordatella NASAL INFUSION becomes effective in 4 days. Bordatella INJECTION becomes effective in 2 weeks. Therefore, the nasal infusion is recommended.</p>			
Do your dog(s) have the Bordatella vaccination? (Kennel Cough)			
		YES	NO
If no, will you get your dogs vaccinated for Bordatella prior to accepting your foster dog?			
		YES	NO

**RESIDENCE INFORMATION**

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<b>Is anyone in your household allergic to pet dander?</b>		<b>YES</b>	<b>NO</b>
<b>If yes, how will allergies be managed if you foster an animal?</b>			
<b>Regarding your residence do you:</b>			
	<b>Own a single home?</b>		
	<b>Own a condo / townhouse?</b>		
	<b>Rent / lease a single home?</b>		
	<b>Rent lease condo / townhouse / apartment?</b>		
<b>If you rent are you allowed pets ? Y/N</b>		<b>YES</b>	<b>NO</b>
<b>If you rent and animals are permitted, please provide either landlord's contact information below or written approval to foster.</b>			
<b>Landlord Name:</b>		<b>Landlord Phone:</b>	
<b>Describe housing / space (including information on home environment, size of yard, busy streets nearby, lots of stairs, etc.) Provide pictures if possible.</b>			
<b>Do you have a fenced in hard where you reside? If you have a fence what is the height and fencing material? (wood, chain link, wire, block, etc)</b>			
<b>If you answered "no fence", please describe how will you provide for the dog's safety while it is outside, as fosters MAY NOT be outside without some form of containment i.e. fence, run tie-out, leash. (Dogs Only)</b>			
<b>Describe a normal , daily schedule at your home and how this would relate to the foster animal:</b>			
<b>How many hours per day would your foster animal be alone / unattended?</b>			
<b>Sunday</b>		<b>Thursday</b>	
<b>Monday</b>		<b>Friday</b>	
<b>Tuesday</b>		<b>Saturday</b>	
<b>Wednesday</b>			

<p><b>If greater than 6 hours what provisions will you make for the dog to relieve itself and get exercise during your absence? (Dogs Only)</b></p>			
<p>Would you agree not to leave the foster dog unattended for extended periods of time greater than that discussed above?</p>			
		YES	NO
<p>If NO, why?</p>			
<p>As a foster, we rely on you to follow through in your commitment and responsibility with regard to your foster animal and see them through to the finalization of their adoption. If there is a situation which makes this impossible, we will attempt to find a new foster for your animal or trade yours for another foster's animal, but you are still responsible for your foster until other arrangements are able to be made. If a foster animal is 'dumped' without notice or other foster arrangements in place you may be held responsible for any boarding/kennel costs to keep your foster animal safe. Do you understand and agree to the above conditions?</p>			
		YES	NO
<p>Arrangements must be made with HSHAR in advance for the relocation of your foster animal in the event of overnight trips, vacations or emergencies and otherwise must remain in your care at all times. Do you understand and agree to the above conditions?</p>			
		YES	NO
<p>As a foster, you may not legally re-home, relocate, or otherwise remove your foster animal from your care without prior the knowledge and consent of HSHAR. If your foster animal is removed from your home without the without prior the knowledge and consent of HSHAR, you risk prosecution. Do you understand and agree to the above conditions?</p>			
		YES	NO
<p>Fosters for HSHAR may NOT utilize ANY form of shock control on their foster animals, including but not limited to shock collars and electric/invisible fencing. Do you understand and agree to the above conditions?</p>			
		YES	NO

**FOSTER ANIMAL INFORMATION**

<p>What size animal are you willing/able to foster? Please give approximate weight, i.e. maximum of 90 lbs, etc.</p>
<p>How many animals are you willing/able to foster simultaneously (depending on size and temperament of course)?</p>

<b>Describe your philosophy on training and correction of unwanted behaviors. Please provide your answer in DETAIL.</b>			
<b>Are you experienced with or able/willing to take animals with behavior problems? If yes of what nature?</b>			
<b>What issues would you NOT be willing to deal with?</b>			
<b>Are you willing to accept animals with medical issues (injuries, physical deconditioning requiring a physical rehab program, a need for daily meds etc)?</b>			
	<b>YES</b>		<b>NO</b>
<b>Are you able to perform the administration of medication? Yes or no to each of the below:</b>			
<b>Pills?</b>		<b>YES</b>	
<b>Liquids?</b>		<b>YES</b>	
<b>Injections?</b>		<b>YES</b>	
<b>Please discuss your previous experience with animals including your knowledge of animal training (basic obedience, advanced, none – help me !)</b>			

**PERSONAL REFERENCES**

<b>Please list the name, address, phone numbers (including area code) of at least three personal references, other than your veterinarian and who are NOT related to you:</b>		
<b>Name</b>	<b>Address</b>	<b>Phone</b>

**FOSTERING**

<b>Have you read and do you understand and agree to the Foster Requirements and Expectations?</b>		
<input type="checkbox"/> YES	<input type="checkbox"/> NO	<b>Sign or Type Your Name :</b>
<b>Are you willing to take initiative in helping to find your foster animal a forever home? (Posting fliers, placing ads, attending adoption events when feasible, taking him/her out in public and spreading the word?)</b>		
<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<b>Will you allow potential adopting families into your home for meet and greets?</b>		
<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<b>Will you take your foster animal to meet a potential adopter in a location other than your home if necessary?</b>		
<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<b>Date you are available to begin fostering:</b>		
<b>I would like to foster because:</b>		
<b>Exposure to different normal life stimuli is very important for the foster animals coming out of high kill shelters. Are you willing and able to expose your foster to such things as car rides, trips to the pet store, public places, walks in neighborhoods and parks, visitors to your home, et cetera?</b>		
<input type="checkbox"/>	<b>YES</b>	<input type="checkbox"/> <b>NO</b>
<b>While your foster is in your home, you will be expected to monitor food and water intake, bathroom habits, likes and dislikes, et cetera. You are expected to let us know of any issues as soon as they are apparent. You are expected to provide pictures at regular intervals for posting and to show progress as they become stronger and better nourished. You are expected to keep them clean, warm, safe, and loved as if they were your own. Some may require a physical 'rehab' schedule to build muscle tone and stamina. Do you understand and agree with these responsibilities?</b>		
<input type="checkbox"/>	<b>YES</b>	<input type="checkbox"/> <b>NO</b>

<p><b>Have you or has anyone in your household ever been accused or convicted of any animal related offence (including but not limited to abuse, cruelty, neglect or overpopulation, nuisance reports, etc)? If so please provide details of the situation and include lawyer or magistrate contact information:</b></p>
<p><b>Comments / Additional Information you wish to share with us:</b></p>

**By signing below you agree to abide by the above conditions and responsibilities of fostering as stated therein. Any failure to perform these duties as agreed upon may result in legal action. Your electronic or handwritten signature below signifies understanding of and agreement to the foster conditions and responsibilities and your willingness to abide by them. Your electronic or handwritten signature below signifies as well that you have answered all questions honestly and to the best of your ability and/or knowledge.**

<b>Signature:</b>		<b>Date:</b>	
<b>HSHAR Rep.</b>		<b>Date:</b>	

**Please send form to:**

**Email: [contact@hshar.org](mailto:contact@hshar.org)**

**OR:**

**Postal:**

**HSHAR/Melanie Taylor  
402 Cortland Drive East  
Kennedy Township PA 15136**

**Any questions please contact:**

**Melanie Taylor: 412-715-1117 : [Melanie Taylor@hshar.org](mailto:Melanie.Taylor@hshar.org)**