

Na	SECTION 1. PERSONAL INFORMATION Name: Age (for information only) 18-1	30 30+				
	OccupationEmployer:					
	Email addresses					
	Telephone numbers					
	Driver license or other permanent ID number:					
	SECTION 2. HOUSEHOLD INFORMATION					
1	1. Home address (Street, Number, City, State, Zip):					
۰.	Mailing address (if different)					
2	2. How many TOTAL OTHER PEOPLE live in your household?					
2.	For OTHER PEOPLE, please answer the following (Continue in Section 6 if needed)					
	Name Age Relationship to you					
	Name Age Relationship to you					
	Name Relationship to you					
3.	3. Is everyone in the household in favor of fostering dogs? YES NO					
4.	4. Does anyone in the household have pet allergies?YES NO If yes, who?					
	5. Describe your home: HouseCondoApartmentOther					
	OwnerRenterSub-letHOA memberCo-op memberOther:					
	Front door opens to street Front door opens into courtyard or entryway					
	No YardUnfenced YardPartly Fenced YardCompletely fe	nced yard				
	Yard with Dog Run: describe dog run:					
6.	6. FOR CONDO: Do HOA rules allow pets? Any breed/size restrictions?					
	Please attach copy of applicable restriction/permission pages.					
7.	7. FOR RENTALS: Landlord's name and telephone number:					
_	Please attach Landlord's written permission or applicable rental agreement page(s).					
8.	8. Describe your yard: Size:feet byfeet Surface (grass, stone, etc.)	<u> </u>				
	Height of fence:feet made of? wood, chain link, brick, other:					
~	Number of gates: Do all gates have locks? Do gates open to street?					
9.	Who has access to your yard, besides you (such as: gardener, pool cleaner, children, utility company, roommates, people in other units, other dogs, other pets):					
	SECTION 3. EXPERIENCE					
1.	How many TOTAL OTHER PETS currently live in your household?					
	For OTHER PETS, please answer the following (Continue in Section if needed)					
	NameM/F Breed-descriptionAgeWeight	Fixed?				
	NameM/F Breed-descriptionAgeWeight	Fixed?				
	NameM/F Breed-descriptionAgeWeight	_Fixed?				
	NameM/F Breed-descriptionAgeWeight	Fixed?				
2.	2. How would you describe your level of experience with dogs?Never had a dogHad childh	lood pet dog				
	Had one or more dogs as an adultHave experience withsmallmediumlarg	e dogs				
	Have experience with specific breeds					
	Professional dog trainer or dog-related business or professional: please explain:					

Previous foster or rescue	experience -	Rescue	organizations	you have	worked with	before:

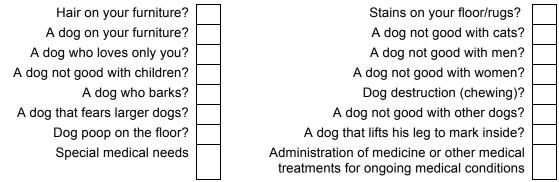
4.	f you have children, please describe their experiences with dogs` Other than any pets listed in Question 1, when did you last have a dog?				
	That dog's nameM/F Breed-descriptionWeightNeutered Y/N				
	Dog's age when you first met How did you come to have that dog?				
	What happened to the dog?				
5.	If you have ever had an animal that required major surgery, or had a medical condition that required medication for a long period of time, please describe your experience with that animal, and the outcome of the treatment:				
6.	How long have you been thinking about fostering?				
7.	What are your main reasons for wanting to foster?				
	SECTION 4. PLANNING FOR A PROSPECTIVE FOSTER DOG				
1.	Fosters require investment of both time and money. Can you provide grooming, proper diet, shelter and				

	ercise for a foster dog? Yes No Can you take a dog for vaccinations and to the vet?YesNo				
2.	Do you believe you are able to make a commitment to care for a foster dog placed in your care, until the dog is permanently placed with an adoptive home, whether this takes days, weeks, or months?YesNo				
3.	Are you willing to follow suggestions regarding type(s) of food, times of feeding, and amount of food for a foster dog? Yes No				
4.	Who would bathe, trim the toenails, brush, and groom the foster dog?				
5.	Will you use the recommended flea control? Yes No				
6.	Where would a foster dog go potty (dog-litter box, paper pads, paper in room, in its crate, in the dog run, outside in yard, while being walked)				
9.	Describe how you would plan to house-train a foster dog:				
10.	Would a foster dog in your care wear a collar with identification tags at all times?YesNo				
	If no, please describe when a collar would <u>not</u> be worn:				
11.	Are any rooms in your house off-limits? If so, how would you keep a foster dog out of the room(s)?				
12.	Where would a foster dog generally sleep at night?				
13.	3. Where would a foster dog usually spend the day (inside, outside, other: describe)				
14.	What are your daily work hours away from home?				
15.	How long during each workday would a foster dog be without you?				
16.	Where would a foster dog stay while you are at work?				
17.	Would anyone else be at home with a foster dog while you are working?YesNo				
	If yes, who?				
18.	Mould you plan to use a des wellow, a not sitter, or a des devicers facility to serve far a factor des while you				
	Would you plan to use a dog walker, a pet sitter, or a dog daycare facility to care for a foster dog while you are working?NeverSometimesRegularly				

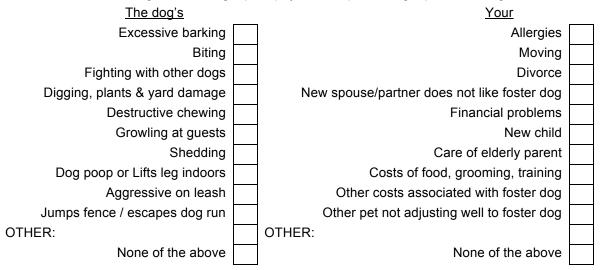
- 20. If you have prior experience with a dog walker, daycare facility, pet sitter, or boarding facility. please provide the name of the service provider and tell about your experience(s) with them: _____
- 21. How often and in what way would you plan to exercise a foster dog? (dog park, hiking trails, neighborhood walks, dog walker, other)
- 22. When and where would a foster dog in your care be allowed off lead (no leash)?
- 23. Would you enroll a foster dog in obedience or good citizen group classes if needed, and attend the class yourself? ___Yes ___No lf no, how would you plan to train a foster dog?_____
- 24. Describe how you think you would discipline a foster dog _____
- 25. Are you willing and able to administer medication orally, topically, or by injection as prescribed for ongoing or newly discovered medical conditions? __Yes __No

SECTION 5. RESCUED DOGS: LESS-THAN-PERFECT

Are you willing to live with the following behaviors, either occasionally or regularly, that can "come with" a
foster dog, and that may or may not be affected by time & training (check all that you think you <u>could</u> live with
occasionally or regularly)



2.. Which of the following reasons might prompt you to stop fostering a particular dog?



Prospective Foster Questionnaire

- 3. If a behavioral problem arises, will you seek help from, and accept advice including referral to a trainer? Yes ___ No ___
- 4. If you have ever worked with dog trainer(s) before, please list the name(s) and describe your experience(s) with them_____

5.	Please describe your limitations	• • • •					
	Number of dogs could foster						
	No non-spayed females	No non-neutered males	<u> </u>	Must have prior Bordatella vaccine			
	No special medical needs	Special medical needs oka	yMobility issues okay	/			
	Blindness okay	Deaf okayWeigh	t range ANY SIZE or <u>to</u>	<u>pounds</u>			
	Very shy or timid okay	Bitey or fearful okay	No aggressive dogs	6			
	Puppies okay		Very active okay				
	Must not hate cats	Must be okay with children					
	Certain personalities preferred						
	Certain breeds preferredCertain breeds/types NOT okay						
	Please describe any other limitations that could make a particular dog good for you to foster, or						
	difficult/impossible for you to fost	ter:					
	SECTION 6. CONTINUING / ADDITIONAL INFORMATION (AS NEEDED)						
Sig	nature		Date				
_							
<u>Pl</u>	ease email this completed	form to					
Fo	r Rescuer Use Only						

 Reviewed by
 Date:
 Status:

Notes: