



Date: _____

Foster Care Application

Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

E- Mail Address: _____

What is the best way and time to reach you? _____

Type(s) of animal(s) you are interested in fostering (circle all that apply):

- Puppies
- Mom and puppies
- Kittens
- Mom and kittens
- Adult cats
- Sick cats
- Adult dogs
- Sick dogs
- Dogs with behavioral issues
- Animals recovering from surgery
- Ferrets
- Rabbits
- Reptiles
- Birds
- Other
- Pet Safe* animals

** Animals in our Pet Safe program belong to someone in a crisis situation that needs a temporary home for their animal(s). They can be any type of animal and any age.*

1. How did you hear about our foster program? _____

2. Why are you interested in fostering for the Humane Society of Elkhart County (HSEC)?

3. Have you ever fostered animals before? yes no If yes, please describe: _____

4. Please describe any formal or informal training you have had with working with animals:

5. Do you have experience training and/or working with dogs with behavioral issues? yes no
If yes, please describe:

6. Have you ever cared for puppies or kittens before? yes no

7. Have you ever given medication to sick animals before? yes no If yes, please describe:

8. How many animals can you foster at one time? _____

9. Are there any specific times of the year when you would **not** want to foster? yes no

If yes, when would you NOT want to foster? _____

10. Do you live in a: house apartment condo other _____

11. Do you rent or own? _____ If you rent, provide your landlord's information:

12. Do you have a fenced in yard? yes no

13. Do you have children in your household? yes no If yes, what ages?

14. Do any members of your family have allergies? yes no If yes, to what?

15. Please list all pets currently living in your household:

Type	Sex	Age	Spayed/Neutered?	Kept in or out?	Current on vaccines?

Please list the name, address and phone # of your veterinarian _____

16. Will you be able to keep your foster animal(s) separate from your own, if necessary? yes no

17. Where do you plan to keep your foster animal(s) during the day, when you are not home, and at night? _____

18. How many hours per day will your foster animals be left alone? _____

19. What will you do if your foster animal becomes lost? _____

20. Would you be willing to speak with potential adopters and assist in the placement of your foster animal(s) in permanent homes? yes no

21. Are you able to transport your foster animal(s) to and from the HSEC frequently, if necessary?
yes no

22. Do you feel emotionally prepared to "let go" of your foster animal(s), regardless of the outcome? yes no

23. Are you aware that animals are euthanized at the HSEC? Do you know why? How do you feel about euthanasia? _____

24. Can you accept the fact that some animals, including foster animals, will not survive or may have to be euthanized and that this decision is up to the HSEC staff? yes no

Thank you for your interest in fostering with the Humane Society!

