



## Foster Application

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone numbers: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email: \_\_\_\_\_

Best way/time to contact you: \_\_\_\_\_

Primary Occupation and Length of Employment: \_\_\_\_\_

Co-Applicant Name (if applicable) \_\_\_\_\_

Co-Applicant phone: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_

How many people are living in your current household? \_\_\_\_\_

Do you have any children? ☐ Yes ☐ No

Please list names and ages for any household member including spouse, children, roommates, or others living in your current household: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are all household members in agreement with fostering an animal? ☐ Yes ☐ No

Do any of the household members have any pet-related allergies or asthma? ☐ Yes ☐ No

Please indicate the type of home you live in:

- ☐ House ☐ Mobile Home ☐ Apartment/Condo  
☐ Townhome  
☐ Other: \_\_\_\_\_

Do you rent or own? ☐ Rent ☐ Own

- Mobile homes and trailers are considered renting depending on the associated mobile home/trailer park. Please provide the associated information below, if applicable.

*\*If you rent:*

- Name of Landlord or Rental Agency: \_\_\_\_\_
- Landlord or Rental Agency's phone number: \_\_\_\_\_
- How long have you lived at this property? \_\_\_\_\_
- Do you have plans to relocate in the near future? ☐ Yes ☐ No
- Are there any Breed Restrictions at this property? \_\_\_\_\_

**Verification required by landlord**

(letter of approval on letterhead or emailed approval from liable source):

Date Received: \_\_\_\_\_ HSL Staff Initials: \_\_\_\_\_

Have you ever adopted or fostered an animal from HSL? ☐ Yes ☐ No

If yes, when? \_\_\_\_\_

Have you ever adopted or fostered an animal from another shelter/rescue? ☐ Yes ☐ No

- If yes, when? \_\_\_\_\_
- Do you still have this animal in your care? ☐ Yes ☐ No
- If you no longer have this animal(s), please explain why: \_\_\_\_\_  
\_\_\_\_\_

List any pets you **have owned or fostered** in the past 5 years, including roommates or relatives' pets that are currently residing in your home

Name	Species	Breed	Age	Current on Vaccines	Spayed/ Neutered	Currently residing in your home? Yes/No (if no – why not?)

Current Pets' Animal Hospital/Vet Clinic: \_\_\_\_\_

Location: \_\_\_\_\_ Phone number: \_\_\_\_\_

How will you separate/isolate the foster animal from any current pet(s) residing in your household, in case of behavioral or medical concerns? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*(It is a requirement that all fosters have the ability to separate foster pets and family pets in case of emergency or as an individual need of the foster pet – no exceptions.)*

**Animal Information:**

What kind of animals are you interested in fostering? ☐ Cat ☐ Dog

If interested in fostering cats, please check all scenarios that you are willing to foster:

- ☐ Long-term foster until the animal is adopted
- ☐ Injured
- ☐ Pregnant/nursing
- ☐ Minor contagious medical condition
- ☐ Orphaned/bottle-fed kittens until old enough for adoption
- ☐ Cat/kitten that is NOT litterbox trained
- ☐ Cat that needs around the clock care
- ☐ Cats with behavioral issues such as shy or fractious

If interested in fostering dogs, please check all scenarios that you are willing to foster:

- ☐ Long-term foster until the animal is adopted
- ☐ Injured
- ☐ Pregnant/nursing
- ☐ Minor contagious medical condition
- ☐ Orphaned/bottle-fed puppies until old enough for adoption
- ☐ Dog/puppy that is NOT housebroken or potty trained
- ☐ Dog that needs around the clock care
- ☐ Dog with behavioral issues such as shy or reactive
  - o Do you have experience in dealing with dogs with behavioral issues? ☐ Yes ☐ No
    - If yes, Please explain: \_\_\_\_\_

How many animal(s) would you be willing to foster at a time?

- ☐ One ☐ Bonded Pair ☐ A Litter

How many hours will the animal(s) spend without human companionship each day? \_\_\_\_\_

What is your preferred energy level in a fostered animal(s)?

- ☐ Low ☐ Medium ☐ High

What behaviors would be unacceptable to you? \_\_\_\_\_

If a behavioral concern should occur/is present in an animal, please explain how you would handle any behavioral problems: \_\_\_\_\_

Are you able to get the animal to the shelter within 48 hours if requested by HSL staff? ☐ Yes ☐ No

Are you prepared to provide the animal's continued health care, including proper diet, scheduled shelter appointments, veterinary appointments, and other treatments? ☐ Yes ☐ No

Please describe the activities or exercise you will provide for the fostered animal (e.g. obedience training, play time, walks, etc.) \_\_\_\_\_

\_\_\_\_\_

Where will this animal be kept? (Mark all that apply)

- |                                       |                                     |                                 |
|---------------------------------------|-------------------------------------|---------------------------------|
| <input type="checkbox"/> Indoors      | <input type="checkbox"/> In/Out Mix | <input type="checkbox"/> Garage |
| <input type="checkbox"/> Outdoors     | <input type="checkbox"/> Crate      | <input type="checkbox"/> Kennel |
| <input type="checkbox"/> Other: _____ |                                     |                                 |

o If outdoors, please describe shelter provided: \_\_\_\_\_

Do you have a yard? ☐ Yes ☐ No

If yes, is it fenced? ☐ Yes ☐ No

If yes, please list type and height: \_\_\_\_\_

How will the animal be confined to your property?

- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> In a kennel  | <input type="checkbox"/> In a garage         |
| <input type="checkbox"/> On a tie out | <input type="checkbox"/> In a fenced in yard |
| <input type="checkbox"/> Other: _____ |  |

**Animals are NOT allowed to roam freely and must never be left unattended outdoors. No exceptions!**

## Humane Society of the Lakes Foster Expectations

\_\_\_\_\_ Only designated HSL staff shall approve and place rescued animals into foster homes. The Animal Coordinator must be notified as soon as possible of any changes in the status of the animal in your care and/or the foster home environment you have indicated about.

\_\_\_\_\_ The Animal Coordinator or assigned staff will be contacting the foster regularly for updates, concerns, of information on the wellbeing of the animal, to update the foster on any necessary information, and to answer general questions. The foster is expected to perform these updates in a timely manner and understand that misinformation of the review can lead to losing foster privileges

\_\_\_\_\_ All basic medical expenses will be provided by HSL and all animals examined. Authorized HSL staff must approve any unusual expenses. Basics include, but are not limited to: Spay/neuter, age appropriate vaccinations, heartworm tests, microchip, and prescribed medications.

\_\_\_\_\_ All basic supply expenses will be provided by HSL. Basic supplies include: Dog – crate, collar, leash, dog food, and some toys. Cat – crate cat food, litter, litter box, and toys. Because each home is set up differently, exercise pens, confinement systems, and scratching posts are available to fosters if supplies are available. **All supplies must be returned when the foster animal is returned.**

\_\_\_\_\_ Foster animals must be kept clean and sanitary for their health and wellbeing. Supplies with which they are housed and/or contained in, such as crates, blankets, and beds should also be kept clean and sanitary for the same reason.

\_\_\_\_\_ Fosters are expected to give the HSL animal safe and adequate housing and care. An HSL foster dog must always wear his/her ID tag, if applicable, (except underage puppies who do not go home with collars) and must be on a leash or in a secure pet carrier when outside of its foster home or its enclosed yard. Dogs should not be left alone outside unsupervised. During transport, the rescued animal must ride inside the car. An HSL cat must live indoors only. The foster is required to notify HSL staff immediately if the animal in your care is injured or missing.

\_\_\_\_\_ Fosters are expected to follow medical and/or behavioral plans set forth by HSL staff. Fosters are expected to report any medical or behavioral concerns within 24 hours to HSL staff. Fosters are expected to use HSL approved training methods. Please feel free to ask for help if you encounter challenges.

\_\_\_\_\_ Fosters are expected to exhibit professional conduct, timeliness, and communication with HSL staff and representatives. Fosters are expected to arrive for appointments on time, as scheduled. If unable to attend a scheduled appointment, fosters are expected to notify HSL staff as soon as possible within 24 hours of the appointment.

\_\_\_\_\_ Fosters must be able to bring animal(s) to the HSL facility within 48 hours if requested by the HSL staff for a meet and greet with a potential adopter.

\_\_\_\_\_ Fosters are expected to care for the foster animal for the time agreed upon with the Animal Coordinator. If an emergency arises, please contact the Animal Coordinator or Shelter Manager to schedule a return to HSL.

\_\_\_\_\_ Legal ownership of all HSL animals remains with HSL until such time as proper adoption is completed. Only authorized representatives will conduct adoptions and process adoptions, transfers, or relinquishments. Fosters are expected to comply with the adoption process if wanting to adopt. If a foster home decides to adopt the animal, the regular adoption fees apply.

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

HSL Staff: \_\_\_\_\_