

FOSTER HOME APPLICATION

Thank you for offering to become a NWASS foster home! To be considered as a foster home for our organization, you must:

- □ Be 18 years of age or older.
- □ If you rent your home you must have consent from your landlord to have a dog/cat.
- Have all personal animals in the home spayed or neutered if they are 6 months or older
- Have all dogs and cats in the home up-to-date on vaccinations.

	Agree to have a home visit done by one of our volunteers. The volunteer will need to see the areas of the home where the animal will be allowed and also visit with family members and current pets.
N	AME:
Fl	JLL ADDRESS:
	HONE NUMBERS: When is it appropriate to contact you via this number? (daytime, evenings, eecific days or hours, etc.) ► Home:
	► Work:
	► Cell:
	► Other:
E-	MAIL ADDRESS:
0	CCUPATION:
W	O YOU REGULARLY MONITOR THIS E-MAIL ADDRESS AND AGREE TO PROVIDE US ITH TIMELY REPONSES TO OUR EMAILS? You may need to monitor your email's spam folders are a provided to make the provided to make

er tor emails from our organization.

IF WE NEED TO FOLLOW-UP WITH YOU ABOUT YOUR APPLICATION, WHAT IS THE PREFERRED METHOD(S) FOR CONTACTING YOU?

Home Phone / Work Phone / Cell Phone / Other Phone / E-mail

TYPE OF HOME YOU LIVE IN:

House - Condo/Townhouse/Strata - Apartment

DO YOU HAVE A FENCED YARD?

If you answered "Yes", list type (wood, chain link, etc) and height of fence:

DO YOU RENT OR OWN YOUR HOME?

If you rent or are a roommate of the home owner, please provide the landlord's or owner's name and phone number. You must have approval to have a dog/cat from your landlord, rental agency or home owner. We also need to know if there are any restrictions, such as size or breed of dog, etc. Please provide the below information so that we may contact them.

PERSONAL REFERENCES: Please provide contact information for a personal reference (someone not currently living with you - someone that knows you and can provide insight on your character, how you feel about pets, how you treat pets, etc). Please contact your reference and let them know that someone from our organization will be contacting them and ask them to return our calls if we leave a message.

PERSONAL REFERENCE

NAME:

PHONE:

EMAIL ADDRESS:

HOW THEY KNOW YOU:

VETERINARIAN REFERENCE:

Please provide the contact information for the Vet clinic(s) that can verify the vaccination and spay/neuter status of current or recent pets.

NUMBER OF PEOPLE LIVING IN THE HOME (count yourself):

NUMBER OF PEOPLE UNDER 18 YEARS OLD (count yourself):

IF CHILDREN UNDER 18, LIST THEIR AGES:

DOES ANYONE LIVING IN THE HOME HAVE ALLERGIES

Allergies Comments- If you checked "Yes, there are allergies" list the type of allergies (cats, dogs, mold, dust, etc.) and if they are being controlled at this time, with medication.

ARE ALL IN HOME IN FAVOR OF FOSTERING A DOG OR CAT FOR OUR ORGANIZATION?

HAVE YOU BEEN A FOSTER HOME FOR ANOTHER RESCUE ORGANIZATION BEFORE? If yes, provide name of rescue:

WHY DO YOU WANT TO BE A FOSTER HOME FOR US?

LIST ANY SIZE OR BREED PREFERENCE AND THE QUALITIES IN A DOG OR CAT THAT WOULD BEST SUIT YOUR HOME.

LIST ANY QUALITIES IN A DOG OR CAT THAT WOULD NOT SUIT YOUR HOME.

DO YOU HAVE PETS LIVING IN YOUR HOME NOW?

No current pets
Yes, dog(s) living in home #:
Yes, cat(s) living in home #:
Yes, other pet (hamsters, rabbits etc) living in home #
ARE ALL YOUR PETS CURRENT ON VACCINATIONS?
ARE ALL YOUR PETS SPAYED OR NEUTERED?
If NO, please explain why.

PETS IN HOME COMMENTS - If you checked "Yes", there are pets living in the home now, please list the following information for each animal.

NAME SPECIES AGE SEX SPAY/NEUTER STATUS

IF OTHER DOGS/CATS LIVING WITH YOU, HOW DO THEY REACT TO OTHER ANIMALS

Does fine with other dogs/cats

Does fine after time to know a dog/cat

Doesn't do well with other dogs/cats

Depends on the dog/cat

Not sure, not around other dogs/cats much

HAVE YOU EVER GIVEN AWAY, SOLD, SURRENDERED OR PUT A PET TO SLEEP?

IF YOU SELECTED "Yes", PLEASE EXPLAIN.

HAS A PET EVER DISAPPEARED, BEEN KILLED OR INJURED WHILE IN YOUR CARE? IF YOU ANSWERED YES, PLEASE EXPLAIN.

WHAT WOULD YOU DO IF YOUR FOSTER DOG OR CAT CHEWS BELONGINGS OR SHOWS OTHER DESTRUCTIVE BEHAVIOR LIKE SCRATCHING FURNITURE? WHAT ACTIONS WOULD YOU TAKE TO CORRECT THE BEHAVIOR?

EXPLAIN WHERE WILL YOUR FOSTER PET/S WILL BE WHEN EVERYONE HAS LEFT THE HOUSE? Loose in house when comfortable in our home / In crate or kennel / In garage / Outside/Other

WHERE WILL YOUR FOSTER DOG OR CAT SLEEP?

Loose in house when comfortable in our home / In crate or kennel / In garage / Outside/Other

HOW WILL YOUR FOSTER DOG BE EXERCISED AND HOW OFTEN?

WHAT ISSUES ARE YOU NOT WILLING TO DEAL WITH?

(Housebreaking, marking, chewing etc.)

DO YOU ACKNOWLEDGE THERE CAN BE DISAGREEMENTS AND WILL YOU STRIVE TO EASE THE TRANSITION AND PROVIDE CARE AND GUIDANCE AS NEEDED?

NOTE: Small disagreements are expected and typical behavior when a new dog is brought into a home where a dog or cat is already living. There can be fear and anxiety and you must be willing to work with your new dog or cat during the transition time (which can be anywhere from days, to weeks, to months) until the dog/cat is comfortable in your home. At that time you'll be able to see your dog's true personality.

ARE YOU FAMILIAR WITH CRATE TRAINING FOR DOGS?

ARE YOU WILLING TO CRATE TRAIN?

HOW LONG WILL YOU BE ABLE TO PROVIDE A FOSTER HOME FOR A DOG OR A CAT?

(We need foster homes for both the long haul and emergency foster homes for a week or two while we set up transport of a animals to another rescue):

As long as it takes / 6 months to a year / Several months / Emergency foster only, 1-2 weeks

DO YOU AGREE TO CONTACT US ASAP IF YOU CAN NO LONGER PROVIDE A FOSTER HOME FOR A DOG OR CAT?

ARE YOU WILLING TO HAVE NWASS VOLUNTEER DO A HOME VISIT?

HOW DID YOU HEAR ABOUT NWASS?

ARE YOU INTERESTED IN BECOMING A MEMBER OF THE NWASS?

NWASS RESCUE'S FOSTER HOME REQUIREMENTS, WHICH INCLUDE PROVIDING A LOVING AND SAFE ENVIRONMENT FOR MY FOSTER DOG/CAT.
SIGNATURE:
DATE:
PLEASE RETURN TO FOSTER HOME CO-ORDINATOR OR MAIL TO NWASS FOSTER, BOX 3064, SMITHERS, BC, V0J 2N0
Vaccination Disclaimer: I am aware of the health risks involved in bringing a potentially ill foster animal into my home, however I choose not to vaccinate my personal animal/s for my own reasons and I am willing to take responsibility and absolve the NWASS from any liability regarding the health of my personal animal.
SIGNATURE:
DATE:

I HAVE ANSWERED ALL QUESTIONS AND PROVIDED ALL NEEDED REFERENCES TRUTHFULLY AND HONESTLY TO THE BEST OF MY KNOWLEDGE. I WILL DO MY BEST TO COMPLY WITH