



Dog Fostering Application

Cuz i Matter Animal Rescue
P.O. Box 3751, Pflugerville, TX 78691

www.CuziMatter.org

Email: cuzimatteranimalrescue@gmail.com

Procedure: Completely fill out & sign this application. For applications selected, a vet-check will be done, and a home visit may be made. Fosters always get to decide which dog(s) they will take in, when and for how long. "Cuz i Matter" Animal Rescue (CiMAR) pays all veterinary expenses for foster dogs. Fosters participate in adoption decisions and placements of their foster dogs, as desired.

Today's Date: _____

Name of dog(s) you want to foster (if known) _____

Please print identification information clearly, *especially email address*:

Applicant(s) Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Place of Employment: _____ Since (mo/yr): ____ / ____

E-mail: _____ Driver License
Number/State: _____

CellPhone: _____ HomePhone: _____ Work Phone: _____

1. Why do you want to foster a dog?

2. What do you think are the most important responsibilities in fostering a dog?

3. Please list any preferences (age, size, sex, breed, personality):

4. Have you fostered for another rescue organization(s)? ___ Yes ___ No If Yes, where, when and how many dogs?

5. Have you ever had an application declined for fostering or adopting an animal from an animal welfare group/animal control facility? ___Yes ___ No If Yes, please explain:

6. Are you willing to take the time to housebreak a foster dog? ___ Yes ___ No or ___ prefer housebroken dog

7. Do you understand that changing a dog's environment may cause even a housebroken dog to have accidents? ___ Yes ___ No

8. If a behavioral problem arises with your foster dog, how will you help your foster?

9. If you are applying to foster a puppy/dog, that is not housetrained, how would you housetrain the dog?

10. Does any member of the family have any allergies to animals? ___Yes ___ No If Yes, please explain:

11. How many people live in your home? _____

12. Are there any children in the household? ___ Yes ___ No If Yes, what are their ages?

13. If obedience training is provided for your foster, are you willing to take him/her to the classes?

14. Describe those pets you currently own:

If you have more animals than space provided, please use an additional sheet of paper and attach to this form

Animal #1					
Name:		Type:		Age:	
Sex:		How long has the pet resided with you:			
Is the pet Spayed or Neutered?		Y or N	If no, please explain:		
Primarily Indoor or Outdoor? (circle one)			Please explain:		
How did you acquire the animal?					
Is the pet up to date on vaccines (DHPP, Bordatella and Rabies)?				Y or N	
Is the pet on heartworm preventative monthly?		Y or N	If Yes, which one?		
Any additional comments:					

Animal #2					
Name:		Type:		Age:	
Sex:		How long has the pet resided with you:			
Is the pet Spayed or Neutered?		Y or N	If no, please explain:		
Primarily Indoor or Outdoor? (circle one)			Please explain:		
How did you acquire the animal?					
Is the pet up to date on vaccines (DHPP, Bordatella and Rabies)?				Y or N	
Is the pet on heartworm preventative monthly?		Y or N	If Yes, which one?		
Any additional comments:					

15. Describe all pets you previously owned in the last 10 years:

If you have had more animals than space provided, please use an additional sheet of paper and attach to this form

Animal #1					
Name:		Type:		Age:	
Sex:		How long did the pet resided with you:			
Was the pet Spayed or Neutered?	Y or N				
Primarily Indoor or Outdoor? (circle one) Please explain:					
How did you acquire the animal?					
Year deceased (or last year you had pet)?					
Cause of death, or where pet is now (detail):					

Animal #2					
Name:		Type:		Age:	
Sex:		How long did the pet resided with you:			
Was the pet Spayed or Neutered?	Y or N				
Primarily Indoor or Outdoor? (circle one) Please explain:					
How did you acquire the animal?					
Year deceased (or last year you had pet)?					
Cause of death, or where pet is now (detail):					

16. List each Vet/Animal Hospital where your animal(s) received care over the last 5 years:

If several vets were used, please explain and provide approximate service dates. Please note that application review cannot be completed unless each vet's phone number is provided. If the space provided is insufficient, please use an additional sheet of paper and attach to this form.

Name(s) and Phone # with area code (for each):

What owner name(s) are records listed under?

17. Could you be available to take a foster dog to veterinary appointments (coordinated with your schedule)? Yes No Sometimes

18. Would you be able to take a foster dog for emergency night/weekend veterinary care, should it be necessary? Yes No

19. What type of home do you live in?
 House Townhouse Duplex Condo Apartment

20. Do you own or rent your residence? Own Rent

If you rent: Landlord's name: _____

Landlord's phone number: _____

What type/size pets are allowed?

If you have rented your current residence for under a year, please provide prior address and prior landlord contact phone number:

Prior address: _____

If you rent: Landlord's name: _____

Landlord's phone number: _____

21. Do you have a fenced yard? ___Yes ___ No

a. What type of fence? _____

b. How tall? (Give range of heights, if relevant) _____

c. Any holes or gaps? ___ Yes ___ No

22. How often would you exercise the dog and for approximately how long?

23. How many hours would the foster dog be left unattended (i.e., workday, including commuting time)? Where will he/she be kept during that time?

24. If you have a very long workday, would you consider getting a mid-day dog walker for a foster dog? ___ Yes ___ No

25. When you are home, where will the foster dog be kept?

26. Where would the dog sleep?

27. When no one is home (i.e. at work, shopping), where would the dog stay (please be specific)?

28. Are you familiar with your local animal control laws? ___ Yes ___ No

29. Have **all adult** family members or housemates agreed to foster a dog?
___Yes ___No (If no, please explain:)

References

Please provide 3 references NOT RELATED TO YOU with whom CiMAR can speak to in regards to your application.

#1	Name:		Relationship:	
Phone(s):				
#2	Name:		Relationship:	
Phone(s):				
#3	Name:		Relationship:	
Phone(s):				

I have read the above information carefully and have filled out this application honestly. I understand that omission of information and/or failure to answer all questions and sign the application can result in this application being declined. Also, if an omission or untruth is discovered after a fostering arrangement is made, or if Cuz i Matter Animal Rescue (CiMAR), determines the dog is not cared for properly, I understand that CiMAR reserves the right to reclaim the animal at any time. I give CiMAR permission to fully investigate the information provided as well as contact veterinarians and related officials. If the application passes this review, I agree to a home and yard visit on a mutually agreed date by a CiMAR volunteer before a fostering decision is made.

In addition, I understand the fostering arrangement is dependent on many factors, including but not limited to the compatibility of the family and home to the individual animal. I understand it is CiMAR's prerogative to decide which foster homes meet our needs & standards, that their decision is final. Unless otherwise indicated by CiMAR, I am free to apply and undergo the fostering application process in the future.

Signature _____ Date _____

Printed Full Name _____

Signature _____ Date _____

Printed Full Name _____