



Foster Care Program
Foster Parent Application
You must 18 years of age

Date
Name
Address
Home Phone
Work/Message Phone
E-mail
Cell Phone
Do you live in a(n): Apartment Mobile Home Condo Single Family Home
Do you: Rent Own
If renting, landowner's name Phone
Do you have homeowner's or renter's insurance? Yes No
How many adults are in your house? Children? If you have children, what are their ages?
Does anyone in your house have allergies to animals? Yes No
Please list the following information about any animals currently living in your household: Type of Animal: Altered?
1. 4.
2. 5.
3. 6.
What previous animal experience, if any, do you have?

Are you currently looking for an animal to adopt? Yes No
How many hours will the foster animal be left alone during the average day?
Is there anyone who will assist you in caring for the animal(s)? Yes No
If so, who?
Where will the foster animal(s) be kept during the day?
At night?
Do you have an indoor area to confine the animal (spare bedroom, crate, laundry room, etc.)? Yes No
Do you have the facilities to isolate the foster animal from your own animals? Yes No
Are you prepared for the negative aspects of fostering such as cleaning up after puppies or kittens; destructive behavior such as clawing furniture, chewing, and litterbox misses; and interrupted sleep? Yes No
Dogs: How will the animal be confined to your property?
Do you have a fenced yard? Yes No If yes, how high is the fence? Type?
Do you have outdoor shelter available? Yes No

All Animals:
Are you able to care for an injured or sick animal on a temporary basis? Yes No
Are you available to administer medicine to an animal if necessary? Yes No
Can you transport the foster animal(s) to the designated vet clinic for vet care? Yes No
Please check the types of animals you would like to foster:
Cat w/kittens Kittens Sick cat/Kitten Adult cat Dog w/puppies Puppies Sick dog/puppy Adult dog
Are you able to provide food for a foster animal while it is under your care? Yes No
If you have special training, qualifications or facilities that you would like us to know about, please briefly describe them:

Please provide the names and contact information of two references (no family members, please)

As a foster parent, we want you to know that it is occasionally necessary to euthanize animals that have been in foster care. Although this is an option of last resort, it does occur.

I confirm that all information supplied on this profile is true and correct. I understand that the CCSPCA is not responsible for any property or personal damage or wounds inflicted or illnesses caused by the foster animal(s).

Signature Date

Thank you for your interest in joining our Foster Parent Program!