

FOSTER APPLICATION

Foster Parent Name _____ Volunteer ID # _____

Address _____ City _____ State _____ Zip _____

Email _____ Home _____ Cell _____

Employer _____ Full Time _____ Part Time _____

1. Do you live in a : House Condo/Townhouse Apt Duplex Mobile Home
2. Do you: Rent/Lease Own

Name and Phone Number of Landlord or Owner _____

Name of complex and/or association _____

PET POLICY: _____

How long have you been at this address? _____

3. How many adults in the household? _____ Children? _____ Ages? _____
4. Do you currently foster or have you fostered for other organizations? Please explain: _____
5. Would there be anyone at home during the day? Yes No
6. Where will the foster animal(s) be when no one is home? _____
7. Do you currently have any resident pets? Yes No Is/are your pets licensed? _____

If Yes, please list:

Name	Species	Sex	Spayed Neutered		Indoor Outdoor Both			Last Vet Visit	Current Rabies Vaccine		Current FeLV/FIV		Current on DAPP and Bordetella	
			Y	N	I	O	B		Y	N	Y	N	Y	N
		F M	Y	N	I	O	B		Y	N	Y	N	Y	N
		F M	Y	N	I	O	B		Y	N	Y	N	Y	N
		F M	Y	N	I	O	B		Y	N	Y	N	Y	N
		F M	Y	N	I	O	B		Y	N	Y	N	Y	N
		F M	Y	N	I	O	B		Y	N	Y	N	Y	N

I agree to a scheduled home inspection at any time. I agree to have my animals vetted. The requirements are: Dogs: DAPP, Bordetella, Rabies License, monthly flea and heartworm preventive, spayed or neutered. Cats: FVRCP, Rabies, License, monthly flea preventive, spayed or neutered, FeLV/FIV negative.

8. Name/number of your animal hospital/veterinarian _____ On monthly flea/tick and HW? _____ Name/number of a non-relative personal reference: _____
9. What would you like to foster? Mom with kittens ____ Kittens only ____ Mom with puppies ____ Puppies only ____ Socialization projects ____ Special needs projects ____
10. What type of supplies will be needed: crate ____ carrier ____ food ____ bowls ____ litter pan ____ litter ____ newspaper ____ collar ____ leash ____

I agree that all of the information, which I have given above, is correct as written and authorize Lee County Domestic Animal Services to verify any information. I understand that I am a volunteer for the foster department and agree to follow the rules of the foster program. If I do not abide by the rules of the foster program, my foster privileges may be revoked.

Signature

Date