



## FOSTER CARE APPLICATION

*We understand that this foster application can seem long, but please be assured that all the below information is completely necessary to completing the foster process.*

Before you fill out this application, please make sure you have thought through this decision. Our foster caregivers take in our animals on a temporary basis until permanent homes can be found. Fosters assist in training our dogs and socializing our cats to help them adjust from the shelter to a new home. Any false, incomplete or withheld information will void your application and will prevent you from fostering or adopting from Forgotten Friends in the future. You may also be subject to criminal and/or civil liability. We do an on site inspection at every home before approving a foster situation.

In order to be considered as a foster caregiver, you must:

- Be 21 years of age or older.
- Have identification showing your current address.
- Have the knowledge and consent of your landlord.

### General Information:

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

Home Street Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Best time to call: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Best time to call: \_\_\_\_\_

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

Driver's License ID Number: \_\_\_\_\_ Are you Over 21? \_\_\_\_\_

How did you find out about Forgotten Friends of Long Island?

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## FOSTER CARE APPLICATION

### Requested Foster Animal

Name of Animal: \_\_\_\_\_

Species: \_\_\_\_\_

Estimated Breed/Description: \_\_\_\_\_

Color/Markings: \_\_\_\_\_

Shelter Identification Number: \_\_\_\_\_ Gender: \_\_\_\_\_

Estimated Age for Dog: \_\_\_\_\_ *(Dogs up to six months old will be considered puppies)*

Estimated Age for Cat: \_\_\_\_\_ *(Cats under 1 year old will be considered kittens)*

### Personal Background Information

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_

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

Spouse or partners name: \_\_\_\_\_

Best number to reach Spouse or partner: \_\_\_\_\_

Have you ever been convicted of a misdemeanor or a felony? \_\_\_\_\_

If yes, please list conviction(s) below:

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# FOSTER CARE APPLICATION

## Housing Information

Do you live in: \_\_\_\_\_?

If Other: explain \_\_\_\_\_

Do you have a roommate? \_\_\_\_\_

If so, roommate name & phone: \_\_\_\_\_

How long have you lived at current address? \_\_\_\_\_ Any plans to move? \_\_\_\_\_

If so, explain: \_\_\_\_\_

*The following information is required so we can verify that you are allowed to keep pets.*

If you rent, are you allowed pets? \_\_\_\_\_

Does your rental agreement restrict the type of pet you may own by size or breed? \_\_\_\_\_

Landlord's Name: \_\_\_\_\_ Phone \_\_\_\_\_

Landlord's Address: \_\_\_\_\_

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

Please list all those living at your present residence:

<i>Name</i>	<i>Relationship</i>	<i>Age</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## FOSTER CARE APPLICATION

Does anyone in your family have allergies to any animals? \_\_\_\_\_

If yes, list types of allergies and to what animals they are allergic:

\_\_\_\_\_

Are all members of household in agreement about fostering this animal? \_\_\_\_\_

If no, explain \_\_\_\_\_

Who will be the primary caregiver of this animal? \_\_\_\_\_

Why do you want to foster this animal? \_\_\_\_\_

Have you ever:

- Taken a pet to a shelter? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

- Had an animal lost or stolen? \_\_\_\_\_
- Had to retrieve your animal from a pound/shelter/animal control facility? \_\_\_\_\_
- Had an animal die as a result of being hit by a car? \_\_\_\_\_

### **Dog Foster Only**

If you currently own, does your dog(s) get along with other dogs? \_\_\_\_\_

What happened to your last dog? \_\_\_\_\_

If other, explain: \_\_\_\_\_

How many dogs have you *owned in the past?* \_\_\_\_\_ *fostered in the past?* \_\_\_\_\_

Are you interested in crate training? \_\_\_\_\_

If we could help with training, would you be interested? \_\_\_\_\_

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### Cat Foster Only

How many cats have you *owned in the past?* \_\_\_\_\_ *fostered in the past?* \_\_\_\_\_

Are any of your cats declawed? \_\_\_\_\_

Have all cats you currently own been tested for feline Leukemia/AIDS? \_\_\_\_\_

Would you consider fostering a pair? \_\_\_\_\_

Would you consider eventually adopting a pair? \_\_\_\_\_

If you own one, does your dog(s) get along with cats? \_\_\_\_\_

If you own one, does your cat(s) get along with other cats? \_\_\_\_\_

What happened to your last cat? \_\_\_\_\_

If other, explain: \_\_\_\_\_

Please list all animals owned over the last ten years beginning with animals currently living in your household:

NAME	SPECIES/ BREED	SEX	AGE	SPAY/ NEUTER	WHAT HAPPENED TO THIS PET?	VET USED

Are they current on vaccinations? \_\_\_\_\_

## FOSTER CARE APPLICATION

### Home Study Information

Do you have a backyard? \_\_\_\_\_ If so, is it fenced? \_\_\_\_\_

How high is the fence? \_\_\_\_\_ feet

If you have no fence, how will your dog relieve itself and get exercise?

\_\_\_\_\_

Do you have a terrace? \_\_\_\_\_ If so, is it enclosed? \_\_\_\_\_

What type of living arrangements will you provide for your new dog?

What is your household activity level? \_\_\_\_\_

How many hours are you gone a day? \_\_\_\_\_ Do you travel often? \_\_\_\_\_

Who will care for the foster animal when you travel? \_\_\_\_\_

Do all adults work full time? \_\_\_\_\_

How many hours a day will the foster animal be alone? \_\_\_\_\_

Do stairs lead to your home? \_\_\_\_\_ Do you have a pool? \_\_\_\_\_

What type of living arrangements will you be providing the foster animal? (check all that apply)

Indoors \_\_\_\_\_ Outdoors \_\_\_\_\_ Both Indoors & Outdoors \_\_\_\_\_

Cable Run \_\_\_\_\_ Dog House \_\_\_\_\_ Fenced in Yard \_\_\_\_\_

Tied up in yard \_\_\_\_\_ Loose on Property \_\_\_\_\_

Other (explain): \_\_\_\_\_

## FOSTER CARE APPLICATION

Where will your foster animal be kept when it is alone? \_\_\_\_\_

Where will your foster animal be kept during the day? \_\_\_\_\_

Where will your foster animal sleep during the night? \_\_\_\_\_

Would you object to a representative of Forgotten Friends inspecting your residence? \_\_\_\_\_

### **Personal References**

*Please provide references of two people not related to you.*

Personal Reference #1: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Address: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Best Time to Call: \_\_\_\_\_

Personal Reference #2: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Address: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Best Time to Call: \_\_\_\_\_

## FOSTER CARE APPLICATION

### Veterinarian Information

Do you have a local veterinarian? \_\_\_\_\_

Do we have permission to contact your veterinarian? \_\_\_\_\_

Vet's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

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

Veterinary records are under the name of: \_\_\_\_\_

Please provide any other information that may be helpful when reviewing your application.

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By typing my name below, I certify that the above information is true and accurate to the best of my knowledge, and I understand that completion of this form is in no way guarantees my ability to foster an animal and that Forgotten Friends has the right to deny any application at their discretion. I give my veterinarian permission to release any veterinary records and information about my current or past pets to Forgotten Friends. I further give permission to Forgotten Friends to call the references I have provided and to inquire and confirm any information provided by me on this application in determining my fitness to foster an animal from Forgotten Friends. I further understand that completion of this form is only the first step in the foster process and that, should I wish to further the foster process, I will be required to submit to an in-home inspection and sign a foster contract. I understand that this application is the property of Forgotten Friends.

NAME (type name): \_\_\_\_\_

DATE: \_\_\_\_\_