

# Aggieland Humane Society - Foster Care Application

**Staff Use Only**

Date \_\_\_\_\_

Approved Foster Home: YES NO Reason \_\_\_\_\_

Staff Initials \_\_\_\_\_

## Part I. About You

Application Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_

Roommate/spouse \_\_\_\_\_

Address \_\_\_\_\_

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

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Roommate/Spouse Phone: (\_\_\_\_\_) \_\_\_\_\_

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

Employer \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Type of residence: **House** **Duplex** **Apartment** **other** \_\_\_\_\_

Do you : **rent** **own** **other**; explain \_\_\_\_\_

Does your lease allow pets? \_\_\_\_\_

Landowner \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Do your windows have screens? \_\_\_\_\_

Number of children in house \_\_\_\_\_ Age(s) of children \_\_\_\_\_

Is anyone allergic to animals? \_\_\_\_\_

Amount of time you are able to devote to your foster animal daily \_\_\_\_\_

What supplies do you have? \_\_\_\_\_

\*Have you attended Orientation (required before fostering) \_\_\_\_\_

Where did you hear about our foster program? \_\_\_\_\_

Continue to 2<sup>nd</sup> page

**Part II. Current Pets living at residence.**

Species	Name/Age	Sex	Neutered	Brazos Co. Tag #
1. Dog/Cat	_____	M F	Y N	_____
2. Dog/Cat	_____	M F	Y N	_____
3. Dog/Cat	_____	M F	Y N	_____
4. Dog/Cat	_____	M F	Y N	_____
5. Other	_____	M F	Y N	_____

Do you have more pets? **No** **Yes**, Explain \_\_\_\_\_

***\*You must have all pets current on vaccinations and county tags to be an approved foster home. See vaccination recommendation for all animals owned by foster family.***

Any behavioral problems? \_\_\_\_\_

Veterinarian name/phone \_\_\_\_\_

Arrangements when you are not home \_\_\_\_\_

***\*Remember you can NOT take the animal out of the Bryan/College Station Area without permission from the Foster Coordinator\****

**Part III. Type of animals you would like to foster (please circle)**

<b>Adult Small Dog</b>	<b>Adult Large Dog</b>	<b>Dog with pups</b>	<b>Orphan pups</b>
<b>Adult Cat</b>	<b>Cat with kittens</b>	<b>Orphan kittens</b>	<b>Other</b> _____

Are you willing to house special needs animals? (Please circle below)

**NO**                      **Medical needs**                      **Behavioral needs**

Where will the pets be kept? \_\_\_\_\_

Do you have a fenced yard? \_\_\_\_\_ Height of fence \_\_\_\_\_ Type of fence \_\_\_\_\_

I (print name) \_\_\_\_\_ have completed the above application and verify the information is true and correct. I have also received the foster care guide and expectations. Aggieland Humane Society is not responsible for any damages or fines caused by an Aggieland Humane Society animal placed into foster care. The foster parent/family is solely responsible for any and all damages or fines caused by an Aggieland Humane Society animal in their care.

**Signature** \_\_\_\_\_ **date** \_\_\_\_\_