

## FOSTER CARE APPLICATION

<b>Name:</b>		<b>Occupation:</b>	
First:	Last:	Company & Title	Hours: <input type="checkbox"/> F/T <input type="checkbox"/> P/T
<b>Date Of Birth <i>(must be 18+ to foster)</i>:</b>		<b>Drivers License:</b>	
Month:	Day:	Year:	Number:    State:
<b>Contact Information:</b>			
Street Address:		City:	Home Phone:
Apt/Unit #		Zip:	Alternate Phone:
			Email:
			Best method of contact:
<b>I am willing to foster the following:</b> <i>(check all that apply)</i>			
<input type="checkbox"/> Cats With Kittens	<input type="checkbox"/> Adult Cat	<input type="checkbox"/> Pre-wean Kittens	<input type="checkbox"/> Adult Dog
<input type="checkbox"/> Kittens	<input type="checkbox"/> Sick Cat or Kittens	<input type="checkbox"/> Pre-wean Puppies	<input type="checkbox"/> Sick Dog or Pups
		<input type="checkbox"/> Dog with Puppies	
		<input type="checkbox"/> Puppies	
<b>Questionnaire:</b>			
01. Do you, or have you ever, owned a pet? <input type="checkbox"/> Yes <input type="checkbox"/> No			
02. What animals do you currently have in your home <i>(if any)</i> ? <input type="checkbox"/> Dog(s) <input type="checkbox"/> Cat(s) <input type="checkbox"/> Other <input type="checkbox"/> None			
03. Are the animals currently in your home spayed/neutered? <input type="checkbox"/> Yes <input type="checkbox"/> No			
04. Who is your current veterinarian? _____ Vet Phone: _____ • May we call him/her for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			
05. Do you own or rent your home? <input type="checkbox"/> Own <input type="checkbox"/> Rent • If you rent, please provide landlord's contact information: Landlord's Name: _____ Landlord's Phone: _____			
06. Please describe the general area where the animals(s) you are fostering will be kept: _____			
07. Are there any children living in the household? <input type="checkbox"/> Yes <input type="checkbox"/> No • If yes, what are their ages? _____			
08. Have you ever fostered animals before with this or any other organization? <input type="checkbox"/> Yes <input type="checkbox"/> No • If yes, what organization? _____			
09. Are you willing to allow the SPCA to visit the animals(s) at your home to take digital photos for our website, or to check on the animals? <input type="checkbox"/> Yes <input type="checkbox"/> No			
10. May a prospective adopter call you regarding your foster animal? <input type="checkbox"/> Yes <input type="checkbox"/> No			
11. May a prospective adopter visit your home to see the animal? <input type="checkbox"/> Yes <input type="checkbox"/> No			
12. Are you willing to be responsible for the animals in your foster care, such as providing food, bedding, water, grooming, training and veterinary care as needed? <input type="checkbox"/> Yes <input type="checkbox"/> No			
13. Can you provide transportation to/from Chanticleer Veterinary Hospital at 2701 Chanticleer Avenue in Santa Cruz if needed? <input type="checkbox"/> Yes <input type="checkbox"/> No			
14. Do you have a fenced yard? <input type="checkbox"/> Yes <input type="checkbox"/> No • If so, how tall? _____ What type of fence? _____			
15. Please list two people who can vouch for your ability to care for foster animals: • Name: _____ Phone: _____ Relationship: _____ • Name: _____ Phone: _____ Relationship: _____			

*The SPCA will provide initial vaccination and medication for minor ailments. We will also provide spay/neuter surgery as well as other procedures we feel are necessary and appropriate. However, such assistance is not guaranteed. Each case is determined by the Santa Cruz SPCA staff.*

### **Terms and Conditions of Foster Parenting With the Santa Cruz SPCA**

1. As a foster parent, I understand that I will be required to keep foster dog(s) on a leash while walking them. I understand that foster dogs must be kept indoors when they are not being walked, and that foster cats must be kept indoors at all times. Initials: \_\_\_\_\_
2. As a foster parent, I understand that I may have an animal in my care for a short period of time (1 week) or an extended period of time (as many as 3 months or more), and that the amount of time is subject to change depending on circumstances at the shelter. I understand that if I will be on vacation during the period of time I am being asked to foster, I am obliged to inform the SPCA to allow the shelter to find the most suitable temporary accommodations for the foster animal(s). Initials: \_\_\_\_\_
3. I understand that, although a foster animal from the SPCA is in my care, the foster animal is the sole property of the SPCA, and that the animal(s) shall be returned to the SPCA upon request, or if I am no longer able to adequately care for the animal(s) Initial: \_\_\_\_\_
4. I understand that as a foster parent, I do not have any right or authority to keep the foster animal(s), to place foster animal(s) in other homes, or to place animals with other individuals unless permission is given in writing from the Santa Cruz SPCA Foster Program Administrator. Initials: \_\_\_\_\_
5. I understand that I must get permission from the Santa Cruz SPCA for any expenses as a result of fostering an animal, including, but not limited to, food, veterinary care, grooming, training, and medication. Initials: \_\_\_\_\_
6. I understand and accept that while I am caring for foster animals, the Santa Cruz SPCA may call me from time to time to check on the animals' progress and to address any concerns I may have. Initials: \_\_\_\_\_
7. I understand that it is occasionally necessary to euthanize animals that have been in foster care, and that this is at the discretion of the SPCA, although it is an option of last resort. Initials: \_\_\_\_\_
8. As a foster parent, I agree to abide by all animal control laws with regard to the foster animals in my care. Initials: \_\_\_\_\_
9. I am not taking a foster animal for any purpose other than to provide temporary care for the animal. Initials: \_\_\_\_\_

**By signing this form, you agree to the above statements and certify that your answers given above are true:**

Signature: \_\_\_\_\_

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