

Raise the Woof Foster Application

Please print information clearly.

First Name

Last Name

Street Address

City

State

Zip Code

Home Phone Number

Cell Phone Number

Work Phone Number

Email Address

Place of Employment

Date of hire (mo/yr)

Best time to contact you (check all that apply): Morning Afternoon Evening

Household Information-Section 1

1. Describe household members (including ages & occupations, if applicable, of all persons in residence):

2. Do any members of the household have any allergies to animals? Yes No

If yes, please list:

3. Is your home: ___rented ___owned

• If rented:

- does your landlord permit animals? ___Yes ___No
- What type/size pets are allowed?

- Landlord contact information (name and phone number):

4. Do you have a fenced yard? ___yes ___no

• If yes:

- What type of fence?

 - How tall (give range of heights, if relevant)?

 - Does the fence belong to you, or to neighbors?

 - Any holes or gaps? ___yes ___no
 - Is the fence attached to the home? ___yes ___no
- *Note: For some dogs, fences of minimum 5 to 6 ft are required.

Fostering Information-Section 2

1. Have you fostered, or are you currently fostering, for another rescue: ___Yes ___No

• If yes

- please state the rescue:

- Are they aware you are applying to foster with Raise the Woof: ___Yes ___No
- Will you be fostering for more than rescue at the same time: ___Yes ___No

2. Are you able to walk or exercise the foster daily? ___Yes ___No

3. How many hours will the foster be left unattended (i.e., workday)?

4. When you are home, where will the foster be kept?

5. Where will the foster sleep?

6. When no one is home (i.e. at work, shopping), where will the foster stay (be specific)?

7. Are you aware that Raise the Woof will help find an approved temporary foster home when needed (emergencies, planned travel, etc)? ___yes ___no

*please provide as much notice as possible when needing temporary foster home help

8. Do you agree to notify Raise the Woof immediately and allow Raise the Woof to make other arrangements if a situation arises and you can not keep your current foster? ___yes ___no

9. Are you aware Raise The Woof will provide all supplies needed? ___yes ___no

10. Do you agree to use the veterinarian selected by Raise The Woof for any foster dog and that Raise the Woof will pay for all veterinary expenses that Raise the Woof deems appropriate? ___yes ___no
*please note, if unsure on treatment before or while at vet office, please contact Jodi or Steph for approval

11. What do you think are the most important responsibilities in fostering a dog?

12.

Please list any preferences (age, sex, breed, personality, size):

13. Please list any characteristics/personalities of a foster that you are not able to accommodate (high-energy, giant sized breeds, puppies, seniors, etc.):

14. Are you willing to foster special needs animals (including but not limited to those with missing limb(s), blindness, deafness, medical conditions): ___ yes ___no
If yes, please list any limitations:

15. If a behavioral problem arises, what steps will you take to work on it?

16. Are you willing to take the time to house train a foster? ___ yes ___no

17. Do you understand that changing a foster dog's environment may cause the dog to have accidents? ___ yes ___no

18. If you are fostering a puppy/dog who is not house trained, how will you house train the foster:

19. Who will be responsible for feeding and taking the foster outside?

20. Who will take care of the foster in the absence of the primary caretaker? Please provide name and phone number(s):

21. Have all family members agreed to foster a dog(s)? ___yes ___no

22. Are you aware that a foster dog may cause damage to your personal property and Raise the Woof is not responsible for any damages? ___yes ___no

Animal Experience Information-Section 3

1. Have you adopted from a rescue previously: ___Yes ___No

- If yes, please state the rescue:

2. Have you ever had an application declined for adoption of an animal from an animal welfare group/animal control facility? ___yes ___no

- If yes, please list and explain:
-

3. Describe those pets you currently own:

If you have more animals than space provided, please use an additional sheet of paper and attach to this form.

Name _____ Type _____ Age _____ Sex _____

Is the pet Spayed or Neutered? ___ yes ___ no

Primarily Indoor or Outdoor? If outdoor, please describe available shelter:

What year did you get the animal? _____

How did you acquire the animal? _____

Comments:

Name _____ Type _____ Age _____ Sex _____

Is the pet Spayed or Neutered? ___ yes ___ no

Primarily Indoor or Outdoor? If outdoor, please describe available shelter:

What year did you get the animal? _____

How did you acquire the animal? _____

Comments:

4. Are you aware Raise The Woof requires all dogs in a home be spayed/neutered? ___yes ___no

5. Describe all pets you previously owned in the last 10 years:

If you have had more animals than space provided, please use an additional sheet of paper and attach to this form.

Name _____ Type _____ Age _____ Sex _____

Was the pet Spayed or Neutered? ___ yes ___ no

Primarily Indoor or Outdoor? If outdoor, please describe available shelter:

What year did you get the animal? _____

How did you acquire the animal? _____

Year deceased (or last year you had pet)?
Cause of death, or where pet is now (detail)

Name _____ Type _____ Age _____ Sex _____

Was the pet Spayed or Neutered? ___ yes ___ no

Primarily Indoor or Outdoor? If outdoor, please describe available shelter:

What year did you get the animal? _____

How did you acquire the animal? _____

Year deceased or last year you had pet?

Cause of death or where pet is now (detail):

6. List each veterinary clinic where your animal(s) received care over the last 10 years.

If several veterinarians were used, please explain and provide approximate service dates. Please note that application review cannot be completed unless each vet's phone number is provided. If the space provided is insufficient, please use an additional sheet of paper and attach to this form.

Veterinary Clinic

Phone number with area code

What owner name(s) are records listed under:

Date of last vet visit:

Additional info:

7. Are you familiar with your local animal control laws? ___yes ___no

How did you hear about Raise The Woof?

I have read the above information carefully and have filled out this application honestly. I understand that omission of information and/or failure to answer all questions and sign the application can result in this application being declined. Also, if an omission or untruth is discovered after a foster placement takes place, I understand that the Raise The Woof reserves the right to reclaim the animal. I give Raise the Woof permission to fully investigate the information provided as well as contact veterinarians and related officials. If the application passes this review, I agree to a home and yard visit on a mutually agreed date by a Raise the Woof volunteer before a decision is made.

In addition, I understand the decision to foster is dependent on many factors, including but not limited to the compatibility of the family and home to the individual animal. I understand it is Raise the Woof's prerogative to decide which home is most appropriate and that their decision is final, and therefore I will not argue with the decision. Unless otherwise indicated by Raise the Woof, I am free to apply and undergo the application process in the future.

Signature(s)

Date _____

Printed Full Name(s):

Raise The Woof
Non-Profit ID# 501(c)(3) #pending
Dickinson, ND 58601
raisethewoof701@gmail.com
701-590-2645 Steph