



# Greater Hillsdale Humane Society

## Foster Care Dog Application

Name \_\_\_\_\_ Date: \_\_\_\_\_  
Address \_\_\_\_\_ Apt.: \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_ Email address \_\_\_\_\_  
Phone # \_\_\_\_\_ Alternate # \_\_\_\_\_

Are you willing to have a GHHS representative visit your home prior to fostering a pet? Yes \_\_\_\_\_ No \_\_\_\_\_

\*Please note a home visit is required

What types of animals are you interested in providing foster care for? Dogs with special needs \_\_\_\_\_  
Adult dogs \_\_\_\_\_ Mama dog w/puppies \_\_\_\_\_ Puppies \_\_\_\_\_ Bottle puppies \_\_\_\_\_ Hospice care \_\_\_\_\_

I have owned a pet before: Yes \_\_\_\_\_ No \_\_\_\_\_

My foster pet needs to get along with, and how many? Dogs \_\_\_\_\_ Cats \_\_\_\_\_ Other \_\_\_\_\_

If needed, are you able to groom and/or medicate a foster pet? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have a safe, enclosed area where you can separate foster pets from your pet(s)? Yes \_\_\_\_\_ No \_\_\_\_\_

Where will the foster pet stay while you are away from home? Crate \_\_\_\_\_ Free roam inside \_\_\_\_\_

Other: \_\_\_\_\_

I understand that animals from a shelter environment need at least 30 days to decompress Yes \_\_\_\_\_ No \_\_\_\_\_

### Household information:

Do you? Own house \_\_\_\_\_ Rent house \_\_\_\_\_ Rent apartment \_\_\_\_\_ Mobile home \_\_\_\_\_

How many adults live in household? \_\_\_\_\_

How many children live in the home? \_\_\_\_\_ What are the ages? \_\_\_\_\_

My house is best described as: Quiet \_\_\_\_\_ Moderately active \_\_\_\_\_ Chaotic \_\_\_\_\_

### Foster home program and requirements:

- Provide a safe, nurturing environment for the pet
- Allowing sick or injured animals to recover in a safe environment so they heal more quickly.
- Work with the pet to help correct behavioral issues if necessary
- Foster pet must have a warm, dry and safe place in a separate room in the home away from other animals.
- Must be able to keep accurate and up-to-date medical records
- Ability to travel occasionally to and from GHHS to receive vaccines and other care.
- Foster families with children are welcome, but parents must supervise and assume responsibility for the pets in their care.
- Adult dogs / puppies should never be left outside unsupervised
- Reduce socialization of puppies outside of the home until they have received full vaccinations (**6, 8, 12 and 16 weeks of age**)
- Attend a Foster Training Session at the shelter

### Reference:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

By signing below, I certify that the information I have given is true and I agree to participate in this program.

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



# Greater Hillside Humane Society

## Foster Care Application: Additional Pets

Please list all current animals in your home:

Name	Type of Pet	Breed	Age	Spayed / Neutered?	On Monthly Prevention? (Flea/Tick/Heartworm)

### Other Information:

Veterinarian: \_\_\_\_\_

Please note that we will be contacting your veterinarian for vaccine records on your pet. We require

By signing below, I certify that the information I have given is true and I agree to participate in this program.

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