

12. Please list all pets that have lived in your household in the last 10 years:

Type	Sex	Age	Spay/Neutered?	Vaccinated?	What happened to them?

13. We ask that your current pets are up to date on their vaccines prior to taking home a foster animal. If requested, would you be able to provide us with vaccine records to keep on file at QHS?

Yes _____ No _____

14. Do your current dogs/cats get along with other dogs/cats? Yes ____ No ____ Unsure ____

Please explain: _____

15. Please describe where you will keep your foster animal(s) when you are home/not home?

16. Where will your foster animal(s) sleep at night? _____

17. How many hours per day will your foster animal(s) be left alone? _____

18. What would you describe as unacceptable behaviors in your foster animal (i.e. Growling/hissing, excessive barking, not housetrained, etc.)?

19. What would you do if your foster animal(s) displayed any of those behaviors? _____

20. Under what circumstances would you return your foster animal? (Please describe):

21. For what length of time are you willing to foster an animal? _____

22. Are you willing to foster an animal with behavior challenges?

Yes _____ No _____ Maybe _____

23. What types of behavior challenges do you feel you are able to work with? _____

24. Are you willing to foster an animal with special medical needs?

Yes _____ No _____ Maybe _____

25. Please describe any previous experience or training you've had working with animals:

Which of the following special populations are you interested in fostering?

Please check all that apply:

Adult Cats (Sick or injured)

Adult Dog (Sick or injured)

Mother with kittens

Mother with puppies

Orphaned Kittens

Orphaned puppies

Distressed Cat or Kitten

Distressed Dog or puppy

Respite for Cat/Kitten

Respite for Dog/Puppy

Cat/Kitten in need of 10 day quarantine

Dog/puppy in need of 10 day quarantine

*Animals who need to be fostered for the purpose of a quarantine does not necessarily mean that this animal is sick. Many times this quarantine period is done to make sure they are not sick before they are brought into the shelter environment.

I certify that the above information is true and correct. I understand that any falsification of the above information may be grounds for denial of this application. I acknowledge that this application will remain the property of the Quincy Humane Society.

Print Name: _____

Signature: _____ Date: _____