



Application to Foster

Foster Preference & Experience – check all that apply				
Bottle baby kittens	Weaned kittens	Mom & kittens	Adolescents	Adults
Seniors	Timid	Special Needs _____		
I have socialized kittens	I have bottle fed kittens	I have cared for a special needs cat		
If you have other animals, can you isolate new fosters for 10-14 days in a separate room/crate/playpen? _____				
Can you commit to fostering for at least four weeks? _____ Do you need a starter kit of supplies? _____				
Can you provide photos/videos for adoption promos? _____ Can you do meet & greets: virtual _____ in person _____				
Primary Applicant		Spouse/Partner of Primary Applicant		
First Name _____	Last Name _____	Pronouns _____	Phone _____	Age _____ Email _____
Do you travel extensively? _____				
Residence where animal(s) will live				
Street _____ Apt _____	Do you own/rent/sublet? _____			
City _____ State _____ Zip _____	Is this a house/apartment/other? _____			
Length of time at this address? _____	Are companion animals permitted? _____			
Hours your animal be alone each day _____	Would you move somewhere that does not permit companion animals? _____			
Do all windows have screens? _____	Who else lives in the home?			
Screens are: built-in _____ accordion _____	Children? _____ Ages _____			
Is there a balcony or terrace? _____	Roommates? _____ Ages _____			
Is it enclosed top to bottom? _____	Other? _____ Ages _____			
Does it have a screen door? _____	Person allergic to cats? _____ Smoker? _____			
Is there a backyard? _____ Fenced in? _____				
Will your animal go outside? _____				
Means of Support - Primary Applicant		Means of Support - Spouse/Partner		
Occupation _____	Occupation _____			
If not employed, means of support _____	If not employed, means of support _____			
If employed, employer information	If employed, employer information			
Employer _____	Employer _____			
Street _____ Floor/Suite _____	Street _____ Floor/Suite _____			
City _____ State _____ Zip _____	City _____ State _____ Zip _____			
Phone _____ Ext _____ Start Date _____	Phone _____ Ext _____ Start Date _____			



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References	Companion Animal History
<p>Business Reference (manager, co-worker, client)</p> Name _____ Phone _____ Ext _____ Affiliation _____ Years known _____ <p>Personal Reference who knows your history with animals</p> Name _____ Phone _____ Affiliation _____ Years known _____ Email _____ <p>Veterinarian for current or previous animals</p> Clinic Name _____ Street _____ Suite _____ City _____ State _____ Zip _____ Phone _____ Name records are under _____	<p>Have you had companion animals before? ___ If so, where are they now? _____</p> <p>Have you given up an animal for adoption? ___ If so, why? _____</p> <p>If you have companion animals now, what kind/how many/age(s)? _____</p> <p>Are they up-to-date on vaccinations? _____</p> <p>Spayed/neutered? ___ Cats: FIV+ ___ FeLV+ ___</p> <p>How do you feel about declawing? _____</p> <p>If your current or prior cat was declawed, why? _____</p> <p>Who will care for the animal if you are away? _____</p>

Is there anything else you want us to know?

Certification / Authorization

1. The information provided on this application is complete and accurate to the best of my knowledge.
2. I am fostering this animal as a foster companion animal for myself.
3. No one in the household has been convicted of animal neglect, animal cruelty, or domestic violence.
4. I authorize FOR ANIMALS, INC. to contact all references provided.
5. I understand that completion of this form is the first step in the foster process and does not guarantee a foster.
6. I understand that approval to foster does not guarantee approval to adopt.
7. FOR ANIMALS, INC. reserves the right to make an in-home screening.
8. If for any reason whatsoever I cannot continue to foster, I agree to return the animal(s) to FOR ANIMALS, INC. and only to FOR ANIMALS, INC.

Primary Applicant

I acknowledge that I have read and agree to the numbered items above.

Signature _____ Date _____

Spouse/Partner of Primary Applicant

I acknowledge that I have read and agree to the numbered items above.

Signature _____ Date _____

I want to receive For Animals, Inc.'s newsletter. (We do not send many; you can unsubscribe anytime.)