

HOME FOR THE PAWLIDAYS FOSTER CARE APPLICATION

Shelter name: P.A.W.S. Tinley Park, hereafter “Shelter”.

I, _____ (name of foster applicant),
agree that all statements in this application are made based on personal knowledge and are made
for purposes of my application to foster an animal through Shelter’s “Home for the Pawlidays” Program.

- What type(s) of pet are you interested in fostering? (Please circle)

Dogs: Large or Small

Puppies

Cats

Kittens

What pet experience do you have:

Have you ever fostered before: Yes / No

Where my foster animals will sleep at night:

Where my foster animals will stay during the day when I **AM** home:

Where my foster animals will stay during the day when I am **NOT** home:

- I **own** my home and am permitted to bring an animal or animals into my dwelling.
- I **own** a townhome, condo or duplex and am permitted to bring an animal or animals into my dwelling.
 - Copy of Home Owners Association rules/regulations provided
- I **rent** my home/apartment and am permitted to bring an animal or animals into my dwelling.
 - Copy of lease provided

Landlord’s Name

Telephone Number

Address

City, State, Zip

I have a fenced-in yard.

Height of fence _____

• I have _____ companion animals at my home **currently**.

Below are details for all companion animals currently at my home:

Name	Age	Species (dog, cat, etc.)	Breed (for dogs only)	Gender	Spayed/Neutered
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Percentage of time he/she spends outside _____

Where he/she sleeps at night _____

Where he/she stays during the day when I **am** home _____

Where he/she stays during the day when I am **not** home _____

• The name of current veterinarian(s) I use for my companion animals

Name of specific veterinarian I use _____	Name of specific veterinarian I use _____
Clinic Name _____	Clinic Name _____
Address _____	Address _____
Telephone Number _____	Telephone Number _____
Records are under the name of _____	Records are under the name of _____

• I have _____ children in the house. Ages: _____

List of all people living in the house and/or who have regular contact with my animal(s) and their relationship to me (include family, friends, domestic employees, etc.):

_____	is my	_____
Name		Relationship
_____	is my	_____
Name		Relationship
_____	is my	_____
Name		Relationship
_____	is my	_____
Name		Relationship
_____	is my	_____
Name		Relationship

Please read the following statements about the “Home for the Pawlidays” Foster Program and initial next to them to indicate you understand and agree to abide by them.

- _____ Your foster dog may not be house-trained and puppies can be messy. Your foster cat may not be litter-trained and kittens can be messy. You understand he/she may have accidents in your home.
- _____ Like many dogs, your foster may chew on furniture, clothing, or other objects. Like many cats, your foster cat may scratch on furniture, clothing, or other objects. You are comfortable working with this behavior. The foster home is responsible for any damage.
- _____ You agree to keep your foster dog on a leash, enclosed area or inside your home at all times. You agree to keep your foster cat inside your home at all times.
- _____ You will **NOT** take your foster animal to a veterinarian or administer medications unless directed to do so by the shelter. The shelter will not reimburse fosters for any unapproved veterinary expenses.
- _____ Representatives from the shelter may need to contact or visit you to discuss the foster pet. You agree to be entirely honest and forthright in regard to your foster pet’s condition, be it positive or negative.
- _____ There is some risk to your own animals, especially if your foster animal is not kept separate. You understand that the shelter is not responsible for your own pet’s medical treatment.
- _____ The shelter is the legal guardian of your foster animal and will make all decisions concerning this animal.
- _____ You will not leave your foster animal in the care of another person without approval of Shelter.
- _____ A shelter representative may visit my home for a house check before my foster application is approved.

- As a foster parent in the “Home for the Pawlidays” Program, you agree to care for your foster pet for the assigned dates. Based on the answers on your application, Shelter will choose the best pet to be placed in your home.
- Upon assignment of a foster pet, a shelter representative will contact you to schedule a family visit to the shelter. You will need to bring everyone who resides in your household. If you are going to foster a dog or puppy, we also want you to bring any current dogs residing at your house. We want to make sure your foster pet is the best match possible.
- I understand that if I am approved for fostering, I will also need to carefully read the “Foster Care Agreement,” which is a separate document from this “Foster Care Application.” The Foster Care Agreement represents the legal contract between a foster caregiver and Shelter. I understand that if I am approved to foster an animal, I must review the Foster Care Agreement before I can take my foster animal home. I further understand that I will be asked to agree to the terms of the contract and sign the Agreement before I can take my foster animal home.
- I have read this Application in its entirety, and I agree that all statements contained in this document are made by me, and are truthful.

- I understand that Shelter is very concerned about the security and safety of my foster animal and all the animals in its custody, as well as its ability to keep track of all animals rescued. I understand Shelter will not share this information for any reasons not connected to the foster care program or applicable lawsuits.
- By signing this form, you agree to the above statements and certify that the answers given above are true. Completion of this application does not guarantee acceptance into the “Home for the Pawlidays” Program.

_____	_____
Signature	Date
_____	_____
Name (Print)	Home Phone
_____	_____
Address	Cell Phone
_____	_____
City, State, Zip	Work Phone
_____	_____
E-mail	
_____	_____
Driver’s License Number	State of Issuance

P.A.W.S. of Tinley Park would like to thank you for your interest in making this holiday season a happy holiday for a pet in need.