



Foster Application

SDCD instructions: (1) Fill in blanks on bold lines below and the state at the end of the application. (2) Add, change or remove text depending on your needs and applicable state laws. (3) Copy and have foster care applicant fill out one application. (4) Keep the completed form confidential – ideally locked in a file drawer which is accessible only by essential shelter employees. Service Dogs for Children with Disabilities hereafter “SDCD” 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 one or more animals through SDCD’s foster care program. • I would like to foster SDCD’s-rescued animals. Number of animals I can foster _____

I have a preference for specific animals (List of their ID #'s):

 If any of the animals I specified are unavailable, I am open to substitution. Restrictions on the type of animal I can foster (For example, “No dogs over 30 lbs”, “Only adult dogs”, etc.)

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:

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2017 • I understand that SDCD 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 SDCD will not share this information for any reasons not connected to the foster care program or applicable lawsuits.

My Name: _____

Address: _____

City, State, Zip Code: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____



Email _____ *Email will be the primary method of communication from Shelter, so if you do not check email regularly, please tell us how to best get in touch with you. Social Security Number _____

Driver's License Number _____ State of Issuance _____ Name, address and telephone number of my employer (or business, if self-employed):

Business Name: _____

Telephone _____

Address: _____

City, State, Zip Code: _____

My Position _____

Length of time with this employer: _____

own my home and am permitted to bring an animal or animals into my dwelling.

I rent my home and am permitted to bring an animal or animals into my dwelling.

Landlord's Name: _____

Telephone _____ Address _____

City, State, Zip: _____

Length of time at this residence: _____

I have a fenced-in yard. Height of fence _____ What is it made of? _____ The fence has a gate. The gate has a lock. Description of the latching and locking mechanism: _____

_____ 3 of 5 rev. 27Sep05 • I have _____ companion animals at my home currently. I have copied this page (one for each animal), and I have provided details for (1) all companion animals currently at my home, followed by (2) all companion animals I have had at my home in the last 5 years who are no longer with me (including any fostered animals). Details for One Companion Animal _____

_____ Name Age Species (dog, cat, etc) Breed (for dogs only) Gender Currently residing in my home. Lived in my home in the last 5 years, but no longer with me. What happened to him/her? _____

_____ Spayed/Neutered I have bred this animal in the past. I am currently breeding this animal. I had elective surgery performed on this animal Cat declawed Dog debarked Other (specify) _____

_____ Where I got this animal
_____ 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 _____ Vaccinations administered: _____ When: _____

_____ 4 of 5 rev. 27Sep05 • The name of the veterinarian(s) I use for my companion animals is (if more than one, please list all veterinarians consulted in the last 5 years; provide additional sheets for additional veterinarians):

_____ Name of specific veterinarian I use Name of specific veterinarian I use _____

_____ Clinic Name Clinic Name

_____ Address

_____ Telephone I have

been a client of this vet for _____ I have been a client of this vet for _____ 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 • List of two

references – people who know me (but are not related to me) and my companion animals and have

been to my home recently: _____ is my _____

_____ Name Relationship Phone _____ is my _____

_____ .

• I understand a Shelter representative may visit my home for a home inspection before my foster application is approved. • 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

I understand a SDCD representative may visit my home for a home inspection before my foster application is approved. • 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 Agreement 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 make this statement under penalty of perjury under the laws of the state(s) of Idaho, Oregon, and California.

Signature: _____

Signature Date _____