

FOR OFFICE USE ONLY

- No other pets Cats Dogs Young Children
- Inexperienced Intermediate Experienced
- Small dogs only Cats only Kittens/puppies
- Sick/injured Feral SubQ/Injections

NOTES _____

Please answer as honestly and truthfully as you can. We use this information in order to match the right animal with the right foster home. Your abilities, knowledge, and preferences will help us do this.

Applicant Information: *(all information is strictly for use of the Tails to Tell Animal Shelter)*

Full Name: _____ Phone Number: _____

Address: _____ City: _____

Postal Code: _____ Driver's License #: _____

Do you rent or own your home? _____ Do you have a fenced back yard? YES / NO

If you rent, you must attach a letter from your landlord stating you can have animals in your home.

Do you have other pets in the home? Cats Dogs Other: _____

Please describe the pet(s) age, breed, size, and overall temperament:

Do you have young children living or visiting often in your home? YES / NO

During the day, how often are you away? ____ hours

At night, how often are you away? ____ hours

During the weekends, how often are you away? ____ hours

Would you consent to a home visit by one of our staff members to assess the suitability for the animal? YES / NO

What type(s) of animal are you willing to foster? (select all that apply):

- Dogs: Large Breed Small Breeds Sick/Injured Pregnant/puppies
- Cats: Domestic Feral Sick/Injured Pregnant/kittens

What experience do you have with Dogs:

What experience do you have with Cats:

Please read each question carefully and fill out every section of this questionnaire, regardless of your selections for animals you're willing to foster. We will use this information in order to judge your level of experience with animals on a whole so that we can place the right animal with you. Our interest is only to provide a happy and healthy foster experience for the foster family and the animals under their care.

Have you ever administered medication (pills, topical creams, etc.) to an animal? YES / NO

Would you feel comfortable administering medication to an animal, with a proper demonstration by us? YES / NO

Have you ever administered SubQ or other types of injections to an animal? YES / NO

Would you feel comfortable administering injections to an animal, with a proper demonstration by us? YES / NO

Are you willing and able to treat or feed an animal several times during the night *and* day? YES / NO

What level of first aid care, in general, would you say you have? _____

Is there anything you would like to add regarding your medical abilities with animals?

DOGS:

Do you currently use crates for your own dogs? YES / NO Would you use crates for fostered dogs? YES / NO

In what circumstances do you or would you use a crate? _____

How many times, per week, would you take a medium sized dog for a walk? ____ For how long? ____ mins

Do you take your dogs to off-leash dog parks? YES / NO

Would you take fostered dogs to off-leash dog parks? YES / NO

What kind of training collar are you most comfortable using? _____

What methods have you used with past or current dogs for training purposes? (eg: clicker, punish/reward, Caesar's Way, etc.)

Have you had any experience with aggressive dogs? YES / NO

If so, please check all applicable boxes for type and level of aggression:

- | | |
|---|--|
| <input type="checkbox"/> People / Strangers | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low |
| <input type="checkbox"/> Food / Toy | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low |
| <input type="checkbox"/> Dogs | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low |
| <input type="checkbox"/> Children | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low |
| <input type="checkbox"/> Cats / Other animals | <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low |

High = actually bites/attacks people or other animals, will not back down
Medium = growling, snarling, barking, bared teeth, snaps at people/animals (no actual wound caused), can be distracted or drawn away by force (eg. leash)
Low = growling/snarling, can be distracted or drawn away through commands/punishment/distraction

Please note: We will not place an aggressive dog in a foster home without the full consent of the foster home as well as a further and more involved consultation between ourselves, the animal, and the potential foster home.

Would you be comfortable rehabilitating an aggressive dog? YES / NO

Would you be comfortable rehabilitating a dog with non-aggressive behavioural issues? YES / NO

Are there any behavioural issues you are NOT comfortable with? _____

Have you ever house trained a puppy/dog? YES / NO

PREGNANCY AND LABOR IN DOGS:

Do you have a quiet and seldomly used room that can be used to whelp puppies? YES / NO
Have you ever cared for a pregnant dog? YES / NO Are you aware of the symptoms of labor in dogs? YES / NO
Have you ever delivered or helped to deliver puppies? YES / NO
Would you require assistance in delivering puppies? YES / NO
Would you like us to demonstrate and provide information relating to the delivery of puppies? YES / NO
Would you be able to keep the puppies until they are successfully weaned from their mother? YES / NO
Would you consider continuing to foster the mother after the puppies return to the shelter for adoption? YES / NO

CATS:

Are your current cats indoor or outdoor cats? INDOOR / OUTDOOR *All fostered cats are required to be INDOOR cats.*
Have you ever litter trained a kitten? YES / NO If you have cats, are they litter trained? YES / NO
Where would the litter box be located?_____ How often would you clean a litter box?_____
How would you deter a cat from doing an undesirable behaviour? *ie. scratching furniture, going on the counter*

If you have a dog(s), do any of them chase, bark at, or are scared of cats? YES / NO
If you have other cats, do any of them fight with, growl at, or are scared of other cats? YES / NO
Have you had experience with feral cats? YES / NO
Would you be comfortable rehabilitating a feral cat? YES / NO
If you foster a feral cat, would you like information and support during rehabilitation? YES / NO

PREGNANCY AND LABOR IN CATS:

Do you have a quiet and seldomly used room that can be used for when the kittens arrive? YES / NO
Have you ever cared for a pregnant cat? YES / NO Are you aware of the symptoms of labor in cats? YES / NO
Have you ever delivered or helped to deliver kittens? YES / NO
Would you require assistance in delivering kittens? YES / NO
Would you like us to demonstrate and provide information relating to the delivery of kittens? YES / NO
Would you be able to keep the kittens until they are successfully weaned from their mother? YES / NO
Would you consider continuing to foster the mother after the kittens return to the shelter for adoption? YES / NO

Thank you for offering to become a foster parent for the Tails to Tell Animal Rescue Shelter! As a no-kill shelter, it is easy to reach capacity and not be able to accept any new and deserving animals. Foster homes allow us to take care of, provide proper medical attention to, and rehome many more animals! Although you are welcome to adopt any animal you foster, we strongly discourage it. This is because foster homes are so valuable to our animals!

After you submit this form, we will review your information and select the most suitable animal for foster care. We will then contact you, and set up a Meet & Greet with your new foster pet. You have the final say, and we want you to feel comfortable with the situation – so please be completely honest about any reservations or issues you may have.

While the animal is in your care, we will continue to provide all the necessities they require such as food, litter, and medical care. This information is also included under the Foster Agreement, which we also need signed and dated.

Thanks again!
~ The Tails to Tell Animal Rescue Shelter ~