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 Englewood, Fl 34224
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Foster Care Application

The Suncoast Humane Society appreciates the invaluable service that foster parents provide. We want to make the most informed decision regarding which animals to place in your care. Completing this application is the best way to assure a positive experience for both you and the animals.

Name: _____ Date of Application: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Day) _____ Evening: _____ Cell: _____

E-Mail Address: _____

Are you a permanent resident of Florida? Yes No

If no, what months do you reside in Florida? _____

Age Group: (Minimum 18 years of age) 18 - 25 _____ 25 - 44 _____ Over 45 _____

Do you have any medical conditions, limitations, allergies or fears? _____

Do you have pets in your household now? _____

If yes, what type and quantity? _____

Are they spayed and neutered? _____

Are they current on vaccinations? _____

Are they tolerant of other animals? _____

Veterinarian's Name: _____

Have you ever cared for: young kittens? _____

young puppies? _____

pets requiring medication? _____

Do you have an area to confine your foster pets? Yes No

If yes, where? _____

Are you willing to foster?	Underage kittens?	Yes	No
	Underage puppies?	Yes	No
	Medically recovering cats?	Yes	No
	Medically recovering dogs?	Yes	No
	Nursing mom and kittens?	Yes	No
	Shy animals requiring socialization?	Yes	No

Over Please

Do you Rent Own an apartment Rent Own a house Rent Own a condo
Rent Own mobile home _____ live with parents

If you rent, what is your landlord's name? _____
Phone Number: _____

Do you work? Yes No If yes, how many hours per day are you gone? _____

Do you have children? Yes No If yes, what are their ages? _____

Is everyone in your family comfortable with the idea of providing foster care? _____

Are you willing to take animals back and forth to our shelter in your own vehicle? Yes No

Different animals need to be in foster care for different lengths of time. What do you feel would be the longest you would be willing to keep in animal in your home? _____

Do you understand that anyone interested in adopting your foster animals (including yourself) must go through the standard adoption process? (Of course, we welcome your referrals) Yes No

Can you accept the fact that some animals may not survive or may have to be humanely euthanized if they become seriously ill or display ill temperament? Yes No

I agree to allow Suncoast Humane Society to inspect my home to determine if I will be a good candidate for Foster Parenting. Yes No

Please list two references and their phone numbers:

Name: _____ Phone: _____
Name: _____ Phone: _____

As a foster parent for the Suncoast Humane Society, I agree to abide by the Society's policies and procedures. I understand that although SHS takes reasonable care to screen animals for foster care placement it makes no guarantee relating to the animals health, behavior or actions. I further agree foster pets must be returned to SHS upon request.

Signature: _____ Date: _____

Witnessed By: _____ Date: _____

For Staff Use Only:

Approved: Yes No Staff Name: _____

Date: _____

Comments: _____
