



Foster Care Application Form

This form is to help us find the best match for you and the animals in need of foster care. To be a foster parent you must be at least 18 years of age. Please print all information.

What kind of animal would you like to foster? ☐ Cats ☐ Dogs

With kittens/puppies? ☐ Yes ☐ No If yes: ☐ Bottle Feeding ☐ Eating on Own

With special circumstances? ☐ Temporary Injuries ☐ Taking Medications ☐ Senior Pets

Note that fosters less than four weeks old without their mother may require bottle feeding.

Applicant Information

Full Name: _____ Date: _____

Street Address, City, State: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Applicant Living Situation

Where do you live? ☐ House ☐ Apartment ☐ Mobile Home ☐ Other _____

Do you? ☐ Own a home ☐ Live on military base ☐ Rent ☐ Live with parents

If you rent, please provide your landlord's name and number: _____

How many hours would you have to leave the foster pets alone during the day? _____

Is there a place in your home where the foster pets can be kept isolated from family pets? ☐ Yes ☐ No

If yes, describe the location(s): _____

(CONTINUED ON NEXT PAGE)

Household Information

Name	Relation	Age

Current Pet(s) Information

Cat/ Dog	Name	Breed	Age	Sex	Neut ered/ Spay ed?	Primarily stays (in, out, both)

Veterinary Care Information

Who is your veterinarian? _____ Vet Phone Number: _____

Are your pets up-to-date on vaccinations? ☐ Yes ☐ No

Are your dogs on heartworm preventative? ☐ Yes ☐ No ☐ N/A If yes, what brand? _____

Have your cats been tested for FN/Feline Leukemia? ☐ Yes ☐ No ☐ N/A

If yes, what were the results? ☐ Positive ☐ Negative

Did you ever house a dog that was diagnosed with Parvo/Distemper? ☐ Yes ☐ No

If yes, when? _____ Describe Circumstances: _____

I certify that the above information is true and correct. Converse Animal Shelter, Inc., (CASI) may verify the information provided on this form prior to approving any foster placement.

Signature: _____

Date: _____

Foster Care Agreement

In becoming a foster parent, I am agreeing to abide by all foster care/adoption policies and procedures. I am entering into an agreement with Converse Animal Shelter, Inc.(CASI) and understand that CASI must approve all adoption applications, so I will not promise anyone that they can adopt my foster animal(s).

I understand that CASI must approve all foster placements, and I agree to return my foster animal(s) to CASI's care if they request that I do so.

I also agree that if, at any time in the future, I cannot continue being a foster caregiver for ANY reason, I will not give away, sell or euthanize the animal(s) in my care. Instead, I will contact casipets@sbcglobal.net or call 210-658-4821 for information concerning arrangements to move the animal(s) into other foster homes within the foster care program. I realize that making alternate arrangements may not be immediate.

I understand that CASI bears responsibility for any medical expenses within reason that may occur while the animal is in my care. If an animal requires a veterinary visit, I will contact CASI so that they can arrange approval with their vet, and/or payment for treatment. I agree to refrain from contacting the vet offices myself.

I understand that shelter animals in particular, having been abandoned by their previous owners, come with a lot of "baggage" and may have separation anxiety, may need to re-learn how to behave in a house environment, and may need time to bond with me and my pets.

By signing this agreement, I attest that to the best of my knowledge, the information provided is accurate and complete at the time of submission. I understand that falsely provided information means that CASI may terminate my foster agreement.

Signature: _____ Date: _____

Staff Signature: _____ Date: _____

CASI is happy to receive adoption referrals and recommendations. If you are considering adopting your foster yourself, we will consider your application prior to placing the pet in another home.

Do Not Write Below This Line — For Office Use Only

Listed in Pet Point? ☐ Yes ☐ No Prior Adopters? ☐ Yes ☐ No Email Entered? ☐ Yes ☐ No

Staff Comments: _____

Staff Signature: _____ Date: _____

☐ Accepted ☐ Denied ☐ Pending