

FOSTERING APPLICATION

To foster a dog for **WAGGING DOG RESCUE** ...

1. YOU MUST LIVE IN SOUTHERN CALIFORNIA.
2. CONTRACT: If we approve you to foster one of our rescued dogs, we require a signed fostering agreement.
3. MUST BE 25: Applicant must be at least 25 years old and head of household.

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a 501(c)(3) Organization
 EIN 45-5293643

Foster Care Provider Information

Date	Name	DL/ID #	*verified at Home Visit	DOB	*required
Street address			City, State		Zip
Home phone	Work phone	Cell phone	Employer AND Occupation		
Work address			City, State		Zip
Email address		Type of dwelling: House ___ Duplex ___ Apartment ___ Mobile Home ___ Condo/townhome ___ Military ___ Other _____			
Own or Rent?	Please provide Landlord's name & phone # so we may contact: (or provide complete copy of lease agreement including pet clause)		If you have an HOA, are there pet policies? Pet limit* in your city/county? (*All cities/counties in SoCal have a pet limit - please do not answer 'none'.)		
How long at current residence?	Please describe your yard enclosure, including fence/wall material, height at lowest point, height and material of all gates, type of latch/lock:				

Household Information - Please name all current members and provide ages of all children.

Names of Adults and Relationship to You	Names and Ages of Children
Rate the level of activity in your home: *required Very quiet 1 2 3 4 5 Very active	
Do other young children visit your home? What ages?	

Current Pets in Household

Pet's Name	Type / Breed	M/F	Age	Fixed Y/N	Dog: Current Vaccines DHPP/Rabies/Bordetella	Time lived w/ you

Fostering Application (cont.)



Type of foster dog you think would best fit your home and family:

Breed / Type: _____

Age: < 6 months 6 mos.-1 year 1 year- 5 years 5 years-10 years 10+ years Doesn't matter

Gender: Male Female Doesn't matter

Size (in pounds): < 20 lbs. 20-50 lbs. 51-90 lbs. above 90 lbs.

Coat type: Low shedding Short Medium Long Doesn't matter

Check all the qualities you ideally WANT in your foster dog:

<input type="checkbox"/> Independent	<input type="checkbox"/> Likes other dogs	<input type="checkbox"/> Good with children	<input type="checkbox"/> Low level activity (lap dog, couch potato)
<input type="checkbox"/> Needy	<input type="checkbox"/> Confident	<input type="checkbox"/> Likes cats	<input type="checkbox"/> Strong drives (hunt, herd, retrieve)
<input type="checkbox"/> Athletic	<input type="checkbox"/> Affectionate	<input type="checkbox"/> Good with livestock	<input type="checkbox"/> Very active (jogging partner)
<input type="checkbox"/> Smart	<input type="checkbox"/> Protective	<input type="checkbox"/> Moderately active	<input type="checkbox"/> Other _____
<input type="checkbox"/> Playful	<input type="checkbox"/> House trained		

Check any traits that you will NOT TOLERATE in your foster dog:

<input type="checkbox"/> Noisy	<input type="checkbox"/> Dislikes cats	<input type="checkbox"/> Escapes	<input type="checkbox"/> Drooling
<input type="checkbox"/> Timid, fearful	<input type="checkbox"/> Dislikes dogs	<input type="checkbox"/> Chases livestock	<input type="checkbox"/> Strong drives (hunt, herd, retrieve)
<input type="checkbox"/> Dislikes strangers	<input type="checkbox"/> Not house trained	<input type="checkbox"/> Separation concerns	<input type="checkbox"/> Other _____
<input type="checkbox"/> Dislikes children	<input type="checkbox"/> Hyperactive	<input type="checkbox"/> Chewing	

- Please tell us why you want to foster a dog: _____
- Are all members of the household in complete agreement with fostering? _____
- Are any members of your household allergic to dogs? If YES, please explain _____
- Who will be responsible for care of the dog? _____
- Do you have a dog door? If YES, when will the dog have access to the dog door? (24/7, day only, night only, when home alone, etc.) _____
- How will you confine the dog to your property? (for example: in house, crated; fenced yard, chained; garage; other) _____
- How many hours a day will the dog be left alone? (Please provide as much detail as possible about your schedule with regard to the dog) _____
- Where will you leave the dog when he/she is home alone? _____
- Will the dog be crated? If YES, for how long? _____
- When you are home, the dog would be _____
- Where will the dog sleep at night? _____
- Will there be times when the dog is tied up? _____
- Do you have a pool? If YES, is it fenced? _____
- What are your thoughts on dogs riding in the open back of a pickup truck, Jeep or convertible? _____
- Are you a frequent traveler? If YES, please explain _____
- If you schedule any trips away from home, what are your plans for the care of your foster dog? Please be specific _____
- How long do you feel your foster should be given for an adjustment period? _____

Fostering Application (cont.)



- What training, if any, have you had with a dog that might help you work with a foster dog who needs training? _____
- What will you do if your foster dog chews your belongings or engages in other destructive behavior? _____
- What issues are you willing to work on with a foster dog? (*basic obedience training, fearfulness, distrust of people, socialization, etc.*) _____
- Other than adoption, what conditions or circumstances would cause you to give up a foster dog? _____
- Are you expecting any big changes in the next year (*moving/buying home, getting married/having a baby, changing work schedule, etc.*)? _____
- Would you consider fostering a special needs dog? _____
- Please describe previous pets, if any: _____
- Have your previous and/or current pets been obedience trained? _____
- Regarding your leadership skills with dogs – On a scale of 1 to 10 (*10 being strongest leader and 1 being all love*), what is your pack leadership level? _____
- Have you ever owned multiple dogs at a time? Please explain _____
- How do you anticipate your current pet(s) will react to the new dog? _____
- How do you plan to introduce your current pet(s) to your new dog? Please be specific _____
- Have you ever applied to foster a dog from another rescue group? If YES, please explain when you applied and the outcome _____
- If your foster dog is not house trained, how will you train him/her? _____
- How much exercise will your foster dog get? Please explain _____
- What methods will you use to discipline a foster dog? _____
- Please provide the name, address and phone # of your veterinarian: _____
- Do you have reliable transportation? _____
- Are you willing to take your foster dog to a WDR veterinarian, within a reasonable distance from your home, for any necessary appointments? _____
- What kind of dog food do you feed your dogs? Please be specific: _____
- How did you hear about Wagging Dog Rescue and our Foster Program? _____
- Please add any additional information you wish us to consider when we evaluate your application: _____

This application will be retained by Wagging Dog Rescue. If approved, this application will become part of our Fostering Agreement. We will not share your information with anyone and will only use it to make an informed decision concerning a Wagging Dog foster in need.

I understand that in order to complete the processing of this application, a visit to my home will be scheduled by a representative of Wagging Dog Rescue. By submitting this application, I agree to such a scheduled visit. I also understand that if I rent, my landlord may be asked for a signed acknowledgement or personal meeting prior to finalizing my fostering for Wagging Dog Rescue. I certify that all information provided by me in this application is true and correct.

Signature: _____ Date: _____

Signature: _____ Date: _____