

# MILO



## foster application

Name:	Today's Date:		
Address:	City:	State:	ZIP:
Email:	Home Phone:		
Cell:	Work Phone:		
Occupation:	Employer:		
Spouse Name:	Occupation:		

- Are you interested in fostering cats, dogs, or both?
- Why do you want to foster?
- Have you fostered before?
- What age group do you (the primary fosterer) fall in?  
17-21    21-30    30-45    45-60    60-80    over 80
- Do you have any dogs now? Indoor or outdoor?  
Please list names, ages and breeds as well as a brief personality description. Tell us about any special compatibility needs required. (use another sheet if you need additional space).
- Do you have any cats now? Indoor or outdoor?  
Please list names, ages and breeds as well as a brief personality description. Tell us about any special compatibility needs required. (use another sheet if you need additional space).
- Other animals?
- How many hours will the foster animal be home alone?
- What will you do to provide ample exercise and activity for your foster?
- How would you rate your dog experience? (please circle one)  
1st Time Guardian    Beginner    Intermediate    Advanced
- How would you rate your cat experience? (please circle one)  
1st Time Guardian    Beginner    Intermediate    Advanced
- Do you own or rent?    If you rent, do you have landlord approval to have pets? Y    N  
Please describe your home and the area(s) in which your foster ward will be kept.
- How many other people live in your household? Please list how many and their ages.
- Would you be able to foster a cat or dog taking medication?
- Do you have an area where you could isolate sick animals from your other pets?  
If yes, please describe.

16. Typically foster guardians foster for a week or more. What kind of time frame can you commit to?
17. Would you be willing to have potential adopters meet the animal in your home?
18. Is there anything else you feel we should know?

## cat fosters

1. Where will your foster cat spend his or her days?
2. How about his or her nights?
3. If you have other cats, have they been tested for FIV? Y N What were the results?
4. Have they been tested for FeLV? Y N What were the results?
5. Are you willing to foster (circle all those that apply):

Pregnant Cat

Nursing mother and kittens

Orphan newborns requiring frequent bottle feedings

Kittens *not* requiring bottle feeding

Feral Cat

Cat that has been abused, neglected, or stressed

Cat on daily medication

Cat with a behavioral problem (e.g., urinating outside the box, biting/scratching)

FeLV-positive cat

FIV-positive cat

6. What kind of cat might you **not** want to foster?

## dog fosters

1. Where will your foster dog spend his or her days?
2. How about his or her nights?
3. Do you have any experience with training dogs? Y N

If yes, please describe:

4. Do you have interest in attending training classes with your foster and maintaining in home training?
5. Are you willing to foster (circle all those that apply):

Pregnant dog

Nursing mother and puppies

Orphan newborns requiring frequent bottle feedings

Puppies *not* requiring bottle feeding

Dog that has been abused, neglected, or stressed

Dog on daily medication

Dog with a behavioral problem

Dog that is not yet housebroken

High energy dog

Low energy dog

6. What kind of dog might you **not** want to foster?
7. Do you have a fenced yard?

If yes, please describe your fence (type and height):

Do you have a dog door?