

Sydney Cape
Breton **Branch** SPCA
Foster Care Application

Section 1

Name: _ Date:
Address: City: ^
Postal Code: Home Phone #: Alternate:

I. Please describe your reasons for wanting to be a foster care volunteer with the SPCA:

2. Are you 18 years of age or older? Yes No

Section 2

1. Do you rent or own your home? Rent Own
If you rent, we require your landlord's consent for you to keep animals in your home.
Landlord's name: Phone #:

2. How many people are in your household: Adults: _____ Children and ages: _

3. Do you work Full time? Part time?
 Or are you home during the day?

4. Do you have access to a vehicle? Yes No

5. Do any members of your household have allergies or fears towards animals?
Please explain: _____

6. Which members of your household will be involved in caring for fostered animals?

7. Have you fostered animals for the Cape Breton Branch SPCA or another shelter before? Y / N

Section 3

1. What experience do you have providing care to animals?
2. Are there any animals currently in your home? Yes No If yes, please describe:

| Type of animal | Breed | Sex | Spayed/Neutered | Age | Last Vaccine |
|----------------|-------|-----|-----------------|-----|--------------|
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3. Which veterinarian currently cares for your pets: _____

4. Do you have an area in your home in which fostered animals can be kept isolated from your household pets? If yes, please describe: _____

5. What category of animals are you interested in fostering?
- Pregnant/nursing cats (8-16 weeks)
 - Orphan kittens (2-12 weeks)
 - Healthy cats (1 week to 2 months)
 - Pregnant/nursing dogs (8-16 weeks)
 - Orphan puppies (2-12 weeks)
 - Healthy dogs (1 week to 2 months)
6. Do you have experience with the type of foster care you have indicated an interest in providing? Please explain: _____

Section 4

1. Where will the animal be kept during the day? _____ at night?
When you are not home? _____
2. How many hours a day will the animal be left alone? _____
3. If you are interested in fostering dogs:
- Do you have a fenced yard? Yes No
- Are you willing/able to spend time:
- Training a dog Yes No
 - Exercising a dog Yes No
 - Eliminating behavioural problems Yes No
(ie. barking, jumping, house soiling)
4. If you are interested in fostering cats:
- Where will the cat be kept? Indoor Outdoor
- Are you willing/able to spend time:
- Training a cat Yes No
 - Playing with a cat Yes No
 - Eliminating behavioural problems Yes No
(ie. scratching, jumping on counters, house soiling)
5. Are you willing/able to bring the animal back to the shelter for check-ups?
 Yes No
6. Are you willing/able to bring the animal to a emergency clinic at night if they become ill?
 Yes No
7. Are you willing/able to administer medications if required?
 Yes No
8. Are you willing to attend a foster care orientation on a weekend or weeknight prior to fostering? Yes No
9. Please list the names and phone numbers of 3 references:
- Name: _____ Home#: _____ Alternate: _____
- Name: _____ Home #: _____ Alternate: _____
- Name: _____ Home #: _____ Alternate: _____

Section 5

How did you find out about the Cape Breton SPCA foster program?

- Visiting Shelter
- Radio
- Newspaper
- Television
- Word of Mouth
- Other:

Please submit one piece of identification (ie : driver's licence) to the shelter technician when submitting application.

ID type: _____ ID #: _____

Please read the following carefully:

The decision to become a foster parent is great one. Choosing to bring an animal into your home on a temporary basis can be very rewarding, but can also be tough when it's time to bring the animal back to the shelter. We ask that you make this decision with all members of your family and that you be aware of the responsibility involved in being a foster parent. Once your application has been processed, you will be called by the foster care co-ordinator for a telephone interview, and to be scheduled for a home visit by one of our volunteers. This extensive process is to ensure the protection and well being of the animals in our care. We thank you in advance for your co-operation.

Foster Care Agreement

I understand that it is my responsibility to ensure that animals for which I provide foster care are kept safe and secure and provided with requirements for their daily care and well being.

I fully understand that this animal is in my care on a temporary basis only, and belongs to the Sydney Branch SPCA. I further understand that the purpose of this foster care arrangement is solely to provide care for this animal, and that any decisions regarding the animal's health, treatment or final disposition must be made or authorised by the Shelter Manager. I also agree that when the animal is ready to be made available for adoption, I will return it to the Sydney Branch SPCA.

Foster Care Volunteer

SPCA Representative

Date: _____

Date: _____