 The SPCA of Anne Arundel County Foster Application

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| Applicant’s Name: | Age: | Phone Number: | E-mail Address: |
| Co-Applicant’s Name: | Age: | Phone Number: | E-mail Address: |
| Applicant’s relationship to co-applicant:ddd Spouse Parent/Guardian Roommate Significant Other Other\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Street Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_County:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Please check the following:Do you: Own Rent Do you live in a: House Townhouse Apartment/Condo Other: \_\_\_\_\_\_\_\_\_\_\_ If you rent please list your landlord or complex name and phone number:Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| On average, how many hours will someone over the age of 18-years be home during the day? \_\_\_\_\_\_\_\_\_\_\_ |
| Applicant’s Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work # (in case of an emergency):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Please list all adults over 18-years who live in the household (not including the applicant/co-applicant) :Name: Phone number or e-mail: Relationship to applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Please list all children under 18-years who live in the household or who will interact with the foster animal:Name: Age: Relationship to applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Please list all the companion animals who live in the household or who will interact with the foster animal:Name: Species: Breed: Age: Gender: Spayed or Neutered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_If you have cats, are they: Indoor Outdoor Indoor/OutdoorIf you have cats, have they tested negative for FIV and FeLv: Yes No Unsure Do you have a room/area to keep your foster animal separated from your personal pets? Yes No  |
| Current Veterinary Hospital:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  Veterinary Hospital #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Name records are listed under: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Briefly tell us about your previous animal experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Briefly tell us why you want to foster: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are you able to bring foster animals to the SPCA for veterinary care a minimum of once every two weeks or in case of an emergency? Yes No |
| Have you ever fostered for any animal shelter or rescue group? Yes NoIf yes please list the following:Organization When Type of animal/Reason animal needed a foster:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Are you willing to foster a pregnant animal? Yes No | If yes, please check which kind:  Dogs Cats Rabbits Guinea Pigs Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Are you willing to foster a nursing mother? Yes No | If yes, please check which kind:  Dogs Cats Rabbits Guinea Pigs Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Are you willing to foster orphaned animals?  Yes No | If yes, please check which kind: Dogs Cats Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Please check the age groups of orphaned animals you are able to foster: 0-2 weeks (bottle feeding every 1-2 hours) 2-3 weeks (bottle feeding every 2-4 hours)  3-4 weeks (bottle feeding every 3-6 hours) 4-8 weeks (do not usually need to be bottle fed)  |
| Are you willing to foster an animal needing medical treatment or recovering from surgery? (The SPCA covers all medical expenses for foster animals; You are just providing the care.) Yes No | If yes, please check which kind:  Dogs Cats Rabbits Guinea Pigs  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Are you willing to foster an animal needing Fospice care? (The Fospice Program places elderly or terminally ill animals in homes where they can live out the rest of their days) Yes No | If yes, please check which kind:  Dogs Cats Rabbits Guinea Pigs Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Are you willing to foster an animal who has shown behavior problems due to stress in the shelter? Yes No | If yes, please check which kind:  Dogs Cats Rabbits Guinea Pigs  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(If you checked “yes” for dogs, please ask for information about our Canine Foster Enrichment Program!)** |
| Are you willing to attend a 2-3 hour volunteer training to learn more about our facility and how to properly handle animals? Yes NoI/we give permission for The SPCA of Anne Arundel County, Inc. and/or the SPCA’s authorized agents to verify the information, including the release of medical information pertaining to my pet(s) from the veterinarian(s) provided on the application. I/we certify that the aforementioned information is true and correct to the best of my/our knowledge.Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature of Co-Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Please fax your completed application to **(410) 268-1139** or email to **foster@aacspca.org**

For more information call **(410) 268-4388 ext: 142**

**SPCA of Anne Arundel County’s Foster Enrichment Program (with Chesapeake Dog Training)**

The SPCA of Anne Arundel County’s Foster Enrichment Program places some of the more difficult-to-adopt dogs in temporary foster homes where the dogs can receive extra enrichment training. Many of these dogs are stressed in the shelter environment and improve quickly once in a home. This program not only helps to save a dog’s life, but it is also a great way for YOU to learn about dog behavior and gain invaluable training experience!

Are you willing to foster a dog with potential or known behavioral issues? YES NO

**Are you able to fulfill the following requirements:**

* Have an approved SPCA of Anne Arundel County Foster application? YES NO
* You have completed a 1 1/2 hour classroom presentation on dog behavior, training, and safety techniques? YES NO
* Have you meet with the dog at the SPCA at least once and learn the training that the dog already knows? YES NO
* Are you willing to allow one of Chesapeake Dog Training’s dog trainers to do a home visit with or without the dog to make sure there is a good set-up for the particular dog? YES NO
* Participate in a weekly training session at the SPCA or in-home (depending on the needs of the dog)? YES NO
* Do you agree to send weekly progress reports to Foster Coordinator and Dog Trainer. YES NO
* Do you agree to commit to a time period of 2 weeks to possibly as long 6 - 9 months depending on the needs of the dog? YES NO

If yes, please answer the following questions on the next page, giving as much detail as possible so we can find you the best match….

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| Please check the following options you would be willing to work with (or would like to learn to work with) Dogs who have shown aggression toward humans Dogs who have shown aggression toward other dogs  Dogs who have shown aggression toward other animals Dogs who resource guard Dogs who are leash reactive Fearful Dogs   |
| Have you ever worked with an aggressive dog or a dog with any of the behaviors listed above? If yes, please describe your experience:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Have you ever taken a dog training class? Yes NoIf yes, when and with whom? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Please describe the methods used and the behaviors taught: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| What training equiptment have you used before or would you feel comfortable using?  Martingale collar Easy walk harness Gentle leader Prong collar  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_On average, how many hours a day would the dog be left alone? \_\_\_\_\_\_\_\_\_\_\_\_Are you willing to crate the dog when necessary and when you are not home? Yes NoDo you have a fenced in yard? Yes No Please describe the type of fence:If no fence, how do you plan to exercise this pet?Are there children or other animals in your neighborhood that could often come in to contact with your foster dog? Yes NoAre you willing and able to prevent interaction with anyone and other animals who does not reside in your home? Yes No |