

Home Fostering Volunteer Questionnaire

Information about you and your home:

Date: _____

Name: _____

Address: _____

City/State Zip _____

County _____

Home Phone: _____

Other: _____

Work Phone: _____

Email Address: _____

How do you prefer to be contacted? _____

Do you currently – Rent / Own House _____ Condo _____ Duplex _____

Apartment _____ Townhouse _____ Other _____

If you rent: Landlord's Name _____

Landlord's Phone # _____

Do you have children living in your household? Yes / No

If yes, please list their names and ages:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Does anyone in your household have allergies to animals? Yes / No

If yes, please explain: _____

_____.

Do you own any pets?

Yes / No

How many? _____

Length of time owned _____

What kind(s)?

Where were your animals kept? _____

Are your current pets spayed and/or neutered? Yes / No

If no, please explain: _____

Are your current pets currently vaccinated? Yes / No

Your Veterinarians Name: _____

Phone # _____

Fostering Specific Questions:

Please mark the types of animals you are interested in fostering:

_____ Dogs

_____ Puppies

_____ Litters of puppies

_____ Pregnant Mom

(Note: mom and puppies must be kept together until weaned from mother)

_____ Recovering dogs from injury/sickness

_____ Un-socialized dogs

_____ Cats

_____ Kittens

_____ Litters of kittens

_____ Bottle Fed kittens

_____ Pregnant Mom

(Note: mom and kittens must be kept together until weaned from mother)

_____ Recovering cats from injury/sickness

_____ Un-socialized cats

_____ Ferrets

_____ Rats

_____ Snakes/Reptiles

_____ Rabbits

_____ Birds

_____ Horses

_____ Hamsters

_____ Turtles

_____ Other (please specify: _____)

_____ Gerbils

_____ Fish

If you are interested in fostering dogs or puppies, please answer the following:

1) Do you have a fenced yard/area? Yes / No

Type: Chain-link
Wood

Height of fence: _____

2) If outside for a period of time, is there shelter provided/available to the animal? Yes / No

If yes, please describe: _____

3) Where will the fostered animal be kept during the day? _____
During the night? _____

4) If it is necessary, do you have an indoor area where the animal(s) could be confined? Yes / No

If yes, please describe: _____

If you are interested in fostering cats or kittens, please answer the following:

1) Where will the fostered animal be kept during the day? _____
during the night? _____

2) If it is necessary, do you have an indoor area where the animals could be confined? Yes / No

If yes, please describe: _____

General Fostering Information

- If interested in “bottle feeding kittens” would you be able to feed throughout the day and night? Yes / No
- How did you learn about the Colorado Humane Society Fostering Program?
Friend _____
Newspaper _____
Website _____
Other _____ please explain _____
- Have you ever fostered an animal before? Yes / No
If yes, please explain _____
For which facility(s) _____
- Do you know your local animal ordinances? Yes / No
- You may be required to care for the animal(s) longer than expected (under rare circumstances, possibly up to one year). Are you willing to be responsible for this period of time? Yes / No
- Is there any additional information you would like to share? _____

_____.

Return to: Teresa Broaddus
10531 West Lehigh Avenue
Lakewood, Colorado 80235
(303) 961-3925 – Cell