**K9 Rescue Group Inc.   
Foster Care Application**

**OFFICE USE ONLY  
□ CHECKED AND PROCESSED**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**K9 WOULD APPRECIATE THE PERSON WHO WILL BE PROVIDING PRIMARY CARE OF ANY DOG FOSTERED TO COMPLETE THIS FORM.**

**PERSONAL DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Given Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| **Home Ph: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| **Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | **Suburb: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
|  | | **Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Are you a K9 Volunteer? □ Yes □ No □ Interested in Volunteering** | | |  |

**Do you rent or own? □ Rent □ Own □ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are you currently working?  
□ Yes Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Hours: □ Full time □ Part time □ Casual □ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
No, I am... □ Unemployed □ Retired □ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are you a permanent Australian Resident? □ Yes □ No**

**LIVING SITUATION**

**Your type of dwelling:   
□ House with a small backyard □ House with a medium backyard □ House with a large backyard □ Unit □ Retirement Village □ Acreage □ Caravan Park □ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Below, please list the members of your household by their relation to you and their ages:  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have any members of your household experienced animal related allergies? □ Yes □ No**

**If you have a yard: □ Fenced (Height \_\_\_\_\_\_\_\_Ft & Type :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) □ Unfenced  
If you have a pool: □ Fenced □ Unfenced □ Not Applicable (I don’t have a pool)**

**PET HISTORY**

**Do you currently own a dog or is there a dog currently living at your household? □ Yes □ No  
Please list the dog(s) details below using the chart:**

|  |  |  |
| --- | --- | --- |
|  | **First Dog** | **Second Dog** |
| **Name** |  |  |
| **Breed** |  |  |
| **Sex** |  |  |
| **Age** |  |  |
| **Sterilized?** |  |  |
| **Vaccinated?** |  |  |
| **How Obtained?** |  |  |

**Do you own any other species of animal? □ Yes □ No  
Species/Quantity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What experience do you have with dogs?   
(This question refers to any training, rehabilitation, veterinary or previous foster experience that you may have. Please mention anything you think may be relevant.)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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**Have you considered the negative aspects to fostering dogs, such as destruction of property, regular feeds, mess in the home, disrupted sleep etc.?**

**□ Yes □ No**

**YOUR FOSTER DOG**

**What kind of dog are you interested in fostering?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Where will the dog be during the day? □ Inside the House □ Outside □ Both  
Where will the dog be sleeping at night? □ Inside the House □ Outside   
Approximately how many hours a day will the dog be left home alone? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Where will the dog be when left alone? □ Inside the House □ Outside □ Both**

**What kind of exercise are you prepared to do with the dog, and how often? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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**What kind of training are you prepared to do with the dog? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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**Are you expecting to do any travel in the near future that would affect your ability to care for a foster dog? □ Yes □ No**

**Under what circumstances would you discontinue to foster a dog?  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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**□ I can see no reason as to why I wouldn't continue fostering a dog**

**For what duration are you looking to foster for?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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**Are there any periods of time when foster care would not be available?**

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**Becoming a foster carer for K9 Rescue will require an inspection of your household and fences where a foster dog may reside before your application is approved. K9 Rescue would maintain the right for its' Kennel Manager, Dog Assessor/Behaviourist or other K9 Committee Members to stop by your household unannounced to check on the condition of the dog. Do you have any objection to this? □ Yes □ No**

**While fostering a dog for K9 Rescue you may be required to follow training instructions from our Dog Assessor/Behaviourist and discouraged from using your own training techniques. Do you have any objection to this? □ Yes □ No**

**K9 Rescue would appreciate that foster carers provide the dog's food, treats, bedding, toys, travel and any other requirements at their own expense. Are you in a position, and are willing to, provide these things at your own expense? (Please Note: Medical and health related expenses are provided by K9 Rescue) □ Yes □ No**

**Are you comfortable for any potential adopters to contact you or come into your household to view and spend time with the dog you are fostering? (Please Note: Your opinion on potential owners is considered but you would not have the right to refuse or decline a potential adopter) □ Yes □ No**

**Can you transport your foster dog to and from the vet and K9 Rescue during the week as needed?**

**□ Yes □ No**

**DISCLAIMER  
  
By completing this application, you agree that ALL information you have provided is correct, and that if any information changes you will advise K9 Rescue IMMEDIATELY. You understand that providing untruthful answers or the unwillingness to provide the information requested can result in your foster care application being refused.**

**APPLICANT K9 RESCUE REPRESENTATIVE**

|  |  |
| --- | --- |
| **SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **VOLUNTEER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**OFFICE STAFF TO COMPLETE  
  
IDENTIFICATION/DRIVERS LICENCE SIGHTED? □ YES □ NO   
   
RENTAL PERMISSION SIGHTED? □ YES □ NO □ NOT APPLICABLE  
  
ALL MEMBERS OF HOUSEHOLD MET DOG/S? □ YES □ NO  
  
VISITING DOG VACCINATION SIGHTED? □ YES □ NO □ NOT APPLICABLE  
1# DOG’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE OF VACCINATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NOTES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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