



OFFICE USE ONLY  
 CHECKED AND PROCESSED

## K9 Rescue Group Inc. Foster Care Application

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.)

---

---

---

---

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?

---

---

---

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?**

---

---

---

**What kind of training are you prepared to do with the dog?**

---

---

---

**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?**

---

---

---

I can see no reason as to why I wouldn't continue fostering a dog

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

---

---

---

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

---

---

---

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