Patriot Assistance Dogs Foster Application

In an effort to make sure that we match the right pet with the right home, please take a few minutes to fill out this foster application. Please answer all questions truthfully and honestly. Failure to do so will result in being declined for fostering from Patriot Assistance Dogs. **Patriot Assistance Dogs has the right to do a home visit at any time, check references, and to approve or decline an application.**

Please note: PAD does not allow foster animals to be tied in yards.

Name:		Date: Date of Birth:	
Address:			
City:		State:	Zip Code:
Phone #:		Email:	
Please tell us how yo	u heard about Patriot	Assistance Dogs	::
Is there a specific dog	g you are interested in	i?	
Describe your house	nold (number and age	s of tenants)	
Occupation(s):	Employer(s):		
			tivity/noise levels in your household:
Do you own or rent y	our house?	Please	briefly describe your residence:
If renting, do you hav	e the landlord's writte	en permission to	b have a pet?
Landlord's Name:		Landlord's Phone #:	
			material type?
	ther pets you current		· · · · · · · · · · · · · · · · · · ·
# Dogs:	Age(s):		Breed(s):
			Breed(s):
			Species:
			lame:
			 2:
Please provide refere	nces of people who k		t experiences with pets:
•	· ·		Relationship:
			Relationship:
	st one emergency con		
•			Relationship:
Name:	Phone #:		Relationship:

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Have you ever surrendered a pet? If so, for what reason(s)? ______

What reason(s) would cause you to consider surrendering a pet?

Have you ever been convicted of assault of a person, cruelty to animals, been ticketed for an animal issue, or had an animal removed from your possession? For what reason?

Have you previously fostered for PAD, Marshmallow Foundation, or another organization? Y / N If yes, please list the name of the organization and describe the animal(s) fostered: ______

Are you able to provide adequate exercise, training, and attention so the foster will not become bored and/or destructive?

What behaviors are unacceptable to you, and are you willing to work to overcome them?

Are you willing/able to attend educational classes with your foster? ______ Please tell us where your foster will live, play, & sleep: ______

How will the foster be confined to your property?

Do you agreed to follow all PAD rules and guidelines? Y / N

I understand that if I am ever unable to care for the foster, I am obligated to contact PAD as soon as soon as possible to arrange for the return of the dog. Y/N

By submitting this application, I certify that the information I have given is accurate. Y / N

Applicant Name:	
Applicant Signature:	Date:
PAD Representative:	Date:

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