

Oconto Area Humane Society Foster Volunteer Application



150 South Katch Drive, Oconto, WI 54153
 (920) 835-1738
 ocontoareahumane@gmail.com

CONTACT INFORMATION

Name _____

Home Address _____

Phone _____ Alternate Phone _____

Email _____ Driver's License # _____

PET OWNERSHIP EXPERIENCE

What types of pets are currently in your home?

Species	Breed	M/F	Spayed/ Neutered	Describe Temperament	Current Vaccines	Known Illness or Disease

Do you have a separate area or room in your home where you can contain a foster animal(s) while it is in your care? (circle one) **Yes** **No** Please Explain:

HOME INFORMATION

Is everyone in your family comfortable with the idea of foster volunteering? **Yes** **No**

Do you own or rent your home? **Own** **Rent** **Other**

❖ If you Rent or Other: Have you spoken with your Landlord regarding fostering? **Yes** **No**

Is there anyone in the household who is allergic to animals? **Yes** **No**

Are there children in the home? **Yes** **No** If yes, what ages? _____

Do your children have any experience with animals? **Yes** **No** Please Explain:

What kind of contact will your children have with the foster pet(s)?

How many adults are in your household? _____

What are the daily work schedules of the adults in the household?

While you are at work, will other members of your household care for the foster pet(s)? **Yes** **No**

If yes, what are the ages? _____

Who will be the main caretaker while the foster pet is in your care?

GENERAL QUESTIONS

- Are you willing to take pets back and forth for required vet visits in your own vehicle? **Yes** **No**
- Are you willing to transport to and from OAHS when the pet(s) are ready for adoption? **Yes** **No**
- Are you willing to allow OAHS to conduct a home visit as part of the application process? **Yes** **No**

Different pets need to be in foster care for different lengths of time. What length of time would you feel comfortable keeping a foster pet in your home?

We require that you leave it up to OAHS to adopt foster pet(s) into appropriate homes. We greatly appreciate all the time and effort you will put into helping our animals, but it is important that all OAHS adoptions are finalized through an adoption counselor. Realizing that this is a temporary arrangement, are you certain that you will be able to remain emotionally separated and able to part with your foster pet(s) when the time comes? **Yes** **No**

Are you prepared to deal with a pet that may become ill and ultimately pass away? **Yes** **No**

What type of pets are you willing and able to care for?

(Please circle all that are appropriate for you)

- | | |
|--------------------------------------|---|
| Pregnant cat (and litter once born) | Orphaned kittens needing to be bottle fed |
| Pregnant dog (and litter once born) | Orphaned puppies needing to be bottle fed |
| Cat/kitten needing medical attention | Dog/puppy needing medical attention |
| Dog/puppy socializing | Cat/kitten socializing |
| Under socialized dog | Feral cat |

REFERENCES (Please provide names, addresses, and phone numbers for the following:)

Friend or neighbor who can confirm your experience with animals:

Second Friend or neighbor who can confirm your experience with animals:

Your veterinarian: