

CAT TALES

920 Lafayette Street
Seabrook, NH 03874

FOSTER HOME APPLICATION

WELCOME TO CAT TALES and the FOSTER CARE PROGRAM. We are glad you have come to apply to be a Foster Home for a cat(s) and/or kitten(s) from our rescue. The following information is requested so that our Foster Home Evaluation Team can determine if the set-up is appropriate and if so, the correct cat(s) and/or kitten(s) to join you. The animal's welfare is our foremost consideration. The evaluation process is designed to help us determine if the foster home is in the animal's best interest, and to assist you in finding a cat(s) and or kitten(s) most compatible with your lifestyle. The cat(s) and kitten(s) available for foster care come to the Rescue from a variety of sources. All cat(s) and kitten(s) are examined upon entry, and their health is routinely monitored while at the rescue, but there is always a chance that an animal is incubating a disease without showing any clinical signs. We attempt to have all kittens and mothers tested for Felv/FIV prior to placement in Foster Homes, but it is not always possible. Prior to integrating fosters with home cats, testing should be completed. When placement is done prior to testing, it will be necessary for the foster home to have a separate room to house the foster kitties. In the cases of mother & kittens or pregnant mother, they are usually placed under emergency conditions. When that is the case, she/they are placed in isolation in the foster home, until such time that appropriate veterinary examination, testing and vaccination can be completed, at the expense of Cat Tales. Cat Tales is responsible for ALL medical needs after the cat(s) and kitten(s) have been placed in foster care. Cat Tales is NOT responsible for any damage to your home or other property done by a cat in your foster care. **Please email your completed application to info@cattalesnh.org.**

IN ORDER TO BE CONSIDERED AS AN FOSTER HOME, YOU MUST:

- Be 18 years of age or older
- Have identification showing your present address
- Have the knowledge and consent of your landlord
- Able and willing to spend the time necessary to provide training, socialization & proper care
- Submit to a Home Visitation and Interview by Foster Care Evaluation Team

DATE: _____

NAME(S) _____

OCCUPATION(S) _____

STREET ADDRESS _____

CITY, STATE, ZIP _____

HOME TELEPHONE _____ WORK TELEPHONE _____

EMAIL ADDRESS _____

CAT TALES reserves the right to refuse anyone. No animal will be fostered by persons having a history of losing, giving away, selling, or having animals injured or killed by moving vehicles. No animals will be placed with prospective foster homes that mislead or fail to provide accurate information on this application.

PLEASE COMPLETE THE FOLLOWING QUESTIONNAIRE. UPON COMPLETION, IT WILL BE REVIEWED BY OUR FOSTER HOME EVALUATION TEAM.

1. WHAT KIND OF CAT(S) ARE YOU WILLING TO FOSTER? PLEASE CHECK ALL THAT APPLY.

CAT _____ KITTEN _____ PREGNANT MOTHER _____ MOTHER & KITTENS _____ SPECIAL NEEDS _____

2. WHY DO YOU WANT TO FOSTER? _____

3. IS THIS YOUR FIRST TIME FOSTERING AN ANIMAL? _____

IF NO, PLEASE GIVE DETAILS OF YOUR PAST EXPERIENCES. _____

IF NO, PLEASE GIVE YOUR REFERENCE NAME AND CONTACT PHONE NUMBER _____

4. WHAT PETS DO YOU CURRENTLY HAVE IN YOUR HOUSEHOLD?

	<u>TYPE</u>	<u>SPAYED/NEUTERED</u>	<u>KEPT WHERE?</u>	<u>AGE</u>
	CAT/DOG	YES/NO	IN/OUT	
NAME _____	_____	_____	_____	_____
NAME _____	_____	_____	_____	_____
NAME _____	_____	_____	_____	_____
NAME _____	_____	_____	_____	_____

IF DOG, WHAT TYPE OF DOG? _____

5. Are the above pets current on all vaccinations? Yes _____ No _____

NAME _____	DATE OF LAST VACCINATIONS _____
NAME _____	DATE OF LAST VACCINATIONS _____
NAME _____	DATE OF LAST VACCINATIONS _____
NAME _____	DATE OF LAST VACCINATIONS _____

6. If any of your current pets are cats, have they been tested for Felv/FIV? Yes _____ No _____

7. Who is/was your veterinarian? _____ Phone: _____

8. What will you do if the cat/kitten claws furniture or shows other destructive behavior? _____

9. Do you currently live in a: House _____ Apartment _____ Condo _____ Mobile _____ Home Duplex _____

10. Do you: Own _____ Rent _____ Live with parents _____

11. If you rent, does your lease allow pets? Yes _____ No _____

If you rent, what is your landlord's name? _____ Phone: _____

12. How long have you been at the above address? _____

13. How many people live in your household? _____ How many children and their ages? _____

Do all adults know that you plan to foster? Yes _____ No _____

14. Do you or anyone living in your household have known allergies to animals? Yes _____ No _____

If yes, who has allergies? _____

15. Who will be responsible for the care of this Cat/Kitten(s)? _____

16. Where will this Cat/Kitten(s) be kept during the day? _____

17. How many hours will Cat/Kitten(s) spend alone without human companionship? _____

18. Where will the Cat/Kitten be kept when it is alone? _____

19. How long are you willing to foster a particular assignment? _____

20. Are you willing to provide the food and litter for your foster cat(s)? _____

21. How did you hear about our organization? _____

SPECIAL NOTES:

- All Cat Tales cat(s)/kitten(s) can only be fostered under in-door only situations.
- If fostering assignment involves Mother & Kittens, a private room, away from other in-house pets and children, must be available
- If fostering assignment involves Mother & Kittens and there are children in the household, interaction with the kittens must be under adult supervision.
- If fostering assignment involves Mother & Kittens, the fostering family must be willing to maintain kittens in home environment until they are adopted.
- The information you provide us will be verified before you are approved as a Foster Home. Please read the following statements and sign the application as agreement that you understand their validity as well as the answers above.
- Any falsification or omission of any of the above information will result in automatic refusal as a Foster Home.
- Cat Tales has the right to deny this application for any reason.
- The information you provide us will be verified before you are approved as a Foster Home.
- By signing below you authorize Cat Tales to contact your veterinarian so that they may reveal to us all medical records on your animal(s).
- Cat Tales reserves the right to make pre-approval and follow-up home visits.
- By signing below you agree that you have been provided with a copy of the Foster Care Manual and agree to its full terms.

Signed: _____ Date: _____

Name/Names: _____

Address: _____

Home Tel: _____ Cell Tel: _____ Work: _____

E-Mail: _____