



RES-QUE

An All Breed Dog Rescue
P.O. Box 60816 Reno, NV 89506
Application To Become A Foster Caretaker

Thank you for your interest in providing foster care to rescued dogs while they are waiting to be placed in their “forever” homes!

Not everyone is able to make the commitment to invest time, attention, and love into a dog to let someone else ultimately have the thrill of its companionship. Yet it is only through fostering that we are able to help multiple dogs instead of the one or two that each of us could help every few years if we kept them instead of placing them. As a foster, you ultimately know the dog you will be fostering better than anyone else. There will be times that you will become a foster “failure”, this does not mean that you shouldn’t foster or adopt, just please be aware that as you take on your own dogs, the less ability/time/space you will have to foster. We guarantee that you will fall in love with each of your fosters, please keep in mind the end result of fostering is to give these dogs the best chance of going to good forever homes.

We are requesting the following information to have on file to be a RES-QUE caretaker. You will only need to fill this out once and the information is kept strictly confidential.

Contact Information

Volunteer First Name: _____ Last Name: _____
Volunteer First Name: _____ Last Name: _____
Residence Address: (NOT a P.O. Box) Street Address: _____
City: _____ State: _____ Zip Code _____ Home Phone: _____
Cell Phone: _____ E-mail address: _____

Household Members other than Applicant(s)

Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____

Personal References

List name, telephone number, and e- mail address (if any) of two people, not in your household, and not family members, who we can contact in case we are unable to reach you..

Dwelling Information:

Type (e.g., House, Apartment, Condo, Mobile Home) _____ Rent or Own? _____
If rent, Landlord Name: _____ Phone: _____ Note: We will contact your landlord.
Does your homeowners' insurance policy include an exclusion for damages related to dogs? _____ If no, provide name of company and name and telephone number of your agent. _____

Pets (Current and Past)

Do you currently own any dogs? _____ Do you currently own any cats? _____
Please list all pets (dogs, cats and others) owned now or in the past 5 years. If you have more pets to list, please use Comments.
Type/Breed: _____ Age: _____ Gender: _____ Spayed/ Neutered? _____ Where is it now? _____

Have you ever had a dog that has bitten someone? _____ If Yes, explain. _____

Do all your current pets get along well with other animals? _____ If no, explain: _____

Do all your pets receive regular veterinary care and are they up-to-date on vaccinations _____

Qualifications:

Do you have experience in rescuing dogs or other dog breeds? _____ If Yes, describe _____

Have you ever been convicted of animal cruelty, neglect or abandonment? _____

Are you involved in pit-fighting (breeding, conducting, training, attending) for any species? _____

Are you willing to work with rescued dogs to resolve problem behaviors? (e.g., chewing, pulling on lead, barking, house-training issues) _____ If yes, what types of problems would you NOT feel qualified to correct? _____

How will you correct behavior problems? _____

Do you have experience with training dogs in obedience/behavior modification? _____

Where will the foster dogs be kept? _____
Do children visit in your home? _____ If Yes, ages and frequency _____
Are you willing to supervise the dogs at all times with children under age 10? _____
Is anyone in the household allergic to dogs? _____ Are all household members in favor of rescuing dogs? _____
Must the foster dogs get along with other dogs in your household and/or with visiting dogs? _____
Can you arrange to separate foster dogs from other dogs in your household if they do not "get along"? _____ If yes, how? _____

Are you willing to foster a special needs dog? _____ If Yes or Possibly, what level of special needs would you accept?
Check all that apply: Daily medications, special food, etc. _____ Frequent medications, house training issues, difficulty walking, behavior issues, etc. _____ Blindness, deafness, incontinence, seizure disorder, etc. _____
Do you have a fenced yard? _____ If yes, type: _____ Height: _____ Fully enclosed? _____
Note: Invisible fences are considered "no fence."
How will the foster dogs be exercised, and how often? _____
Who will supervise the dogs while outdoors? _____
Does your home have stairs that the foster dogs will have to go up and down? _____ If yes, describe (e.g. length of stairs, steepness, open or closed tread, side walls, etc.). _____

Is your home air-conditioned? _____ If yes, type (central or room): _____ Is your car air-conditioned? _____
What five words best describe your family? _____

How soon will you be ready to foster a dog? _____ Explain. _____

- For how long are you willing to foster a dog? (Check all that apply.)
- _____ Emergency- 24-72 hours
 - _____ Vacation/Holiday Backup for regular foster caretakers- to maximum of 2 weeks
 - _____ Short Term- up to 4 weeks
 - _____ Standard- 1 month or more
 - _____ Hospice - Caring for an elderly, ill, or unadoptable dog through the end of life.

Are any family members at home during the day time? All day _____ Most of the day _____ Sometimes _____ Seldom _____
Who will care for the foster dogs during vacations or overnight trips? _____
Can someone in the household provide daily care when the primary caregiver is away? _____

Do you have an emergency plan to provide care for your pets if you have to leave town suddenly? _____ If Yes, please describe: _____

What do you feel is the proper use of crates or cages? _____

Veterinarian Care for Rescued Dogs:

Veterinarian Name: Kreature Komforts Animal Hospital.

Address: 2205 Glendale Ave. Suite #117

City: Sparks

State: Nevada

Zip Code: 89431

Phone: _775-356-5524

Foster Coordinators

Karen Vigil 775-771-0293

Lori Mead 775-379-5125

Comments

Initial each item below to signify agreement:

I hereby apply to RES-QUE to become a foster caretaker. _____

I have answered all the above questions truthfully to the best of my knowledge. _____

I have signed the RES-QUE Hold-Harmless Agreement. _____

I have read and agree to follow the RES-QUE Rescue Guidelines. _____

Volunteer Signature: _____ Date: _____ Printed Name: _____

Volunteer Signature: _____ Date: _____ Printed Name: _____