

# Fox Valley Animal Welfare League Foster Care Program



**Thank you for your interest and willingness to open your home to help local shelter animals as they prepare for their new forever homes.**

The purpose of the FVAWL Foster Care program is to help animals that have a good chance of survival and are considered adoptable, but who are either too young, are sick or injured, or are under-socialized and would have difficulty being placed directly into a typical adoptive home. Our foster homes provide a safe and nurturing environment for these animals to prepare for adoption.

*Please consider the following items*

- Time, commitment and patience while meeting the needs of each animal is critical.
- Ability to perform responsibilities including:
  - To feed, shelter, socialize, groom, train and medicate animals as needed.
  - To transport animals to/from vet appointments if necessary.
  - To ensure the safety of all foster animals under your care.
  - To isolate foster pets from other household pets, if necessary.
  - To observe and report any problems with the animals to the Foster Home Coordinator.
  - To comply with the FVAWL Foster Care program philosophies and policies.
- An understanding that the purpose of the foster relationship is solely to provide care for the animal. Once suitable for adoption, placement will be coordinated through The City of Aurora's Animal Control and Care Facility or the FVAWL. Input from the foster home during placement is invaluable and greatly appreciated.

*What is the next step?*

1. Complete the FVAWL Foster Home Application packet.
2. Submit the application along with a check for \$25 made out to the Illinois Department of Agriculture.\*
3. Follow-up home visit by a member of the FVAWL foster program team.
4. Get a tetanus shot if not current.

See the Foster Home brochure on the [fvawl.org](http://fvawl.org) website for answers to frequently asked questions. Additional questions can be directed to the foster coordinator at [foster@fvawl.org](mailto:foster@fvawl.org) or the FVAWL office can be contacted at 630.892.9445.

**Return this completed application to:**

Fox Valley Animal Welfare League  
Attn: Foster Program  
600 S. River Street, Aurora, IL 60506

\* An Illinois Department of Agriculture license is required for each foster home in the state. The IDA application form and check will be submitted to the state once the home has been approved. Yearly IDA license renewal fees will be paid by the FVAWL for active foster homes.



## Fox Valley Animal Welfare League Foster Home Application

Applicant Information	
Applicant Name:	Date:
Street Address:	
City:	State:
Zip Code:	
Home Phone:	Cell Phone:
E-mail Address:	Best Time to Contact:
Are you at least 18 years of age? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Co-Applicant Name:	
Do you have a current tetanus vaccination? Yes <input type="checkbox"/> No <input type="checkbox"/>	
How did you hear about the FVAWL foster home program?	
I am applying to foster:	Dogs/Puppies <input type="checkbox"/> Cats/Kittens <input type="checkbox"/>

Residence & Family Members			
Please select your residence type:	House <input type="checkbox"/>	Townhouse <input type="checkbox"/>	Apartment <input type="checkbox"/> Condo <input type="checkbox"/>
Do you own your residence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Do you have a fenced-in yard?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If yes, how high and of what type of construction?			
If you lease. Does your lease have restrictions regarding animals?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please explain:			
Landlord name & Phone Number:			

Please list all people who live at your residence:

Name	Age	Relationship

Is anyone home during the day?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, who and when?		
If no, how long will the foster animal be left alone each day?		
Do you or anyone in your home have any physical or medical conditions that should be considered when matching your family with an appropriate foster dog or cat?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please describe:		

Please list all pets that live at your residence:

Name	Type	Breed	Age	Gender	Spayed/Neutered?
Do any of your personal pets have issues that would make a foster animal unsuitable for your home? (i.e. dog that doesn't like other dogs)					Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please explain					

### Veterinarian for Current or Past Pets (if any)

Name:		
Street Address:		
City:	State:	Zip Code:

### Fostering Preferences/Experience

How soon are you available to foster?

Immediately	1 week	2 weeks	30 days	Other

Maximum number of DAYS you can foster at a time?

30 days	60 days	90 days	As long as needed
Do you have a current Department of Agriculture Foster Home License?			Yes <input type="checkbox"/> No <input type="checkbox"/>

If applying to foster dogs, please share the experience that you have.

Level of experience	Novice <input type="checkbox"/>	Don't have much experience but am willing to learn
	Experienced <input type="checkbox"/>	Have a good deal of experience with common issues
	Expert <input type="checkbox"/>	Have experience with many different breeds as well as medical and/or behavioral issues

	I/We have specific experience in this area with dogs	
	Yes	No
Fostering*	<input type="checkbox"/>	<input type="checkbox"/>
Rescue work*	<input type="checkbox"/>	<input type="checkbox"/>
Caring for orphaned puppies	<input type="checkbox"/>	<input type="checkbox"/>
Grooming	<input type="checkbox"/>	<input type="checkbox"/>
Obedience training	<input type="checkbox"/>	<input type="checkbox"/>
Other:		
* If yes, what organization (Name, Phone)?		

If applying to foster cats, please share the experience that you have.

Level of experience	Novice <input type="checkbox"/>	Don't have much experience but am willing to learn
	Experienced <input type="checkbox"/>	Have a good deal of experience with common issues
	Expert <input type="checkbox"/>	Have experience with many different breeds as well as medical and/or behavioral issues
	I/We have specific experience in this area	
	Yes	No
Fostering*	<input type="checkbox"/>	<input type="checkbox"/>
Rescue work*	<input type="checkbox"/>	<input type="checkbox"/>
Caring for orphaned kittens	<input type="checkbox"/>	<input type="checkbox"/>
Treating URI's	<input type="checkbox"/>	<input type="checkbox"/>
Other:		
* If yes, what organization (Name, Phone)?		
Do you have any preferences for the animals you are willing to foster?		Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please explain		

Environment					
Where will the foster dog or cat be kept...	Have the run of the house	Be Crated	Blocked off or baby gated in part of house or single room	Tied outside or live in the yard	Other
During the day?					
At night?					

General	
If your foster animal requires veterinarian attention do you have a vehicle and the capability to take the animal to visit the veterinarian during normal business hours?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Have you ever been convicted on any charges related to animal cruelty, neglect, or endangerment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please explain		
Do you or any members of the family living in your home have a criminal record?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please explain		
The state of Illinois Department of Agriculture requires each foster home to submit a Foster Home License Application along with a \$25 per year application fee. Are you capable and willing to complete this application and pay the \$25 fee on a yearly basis (June 30 – June 30) in order to keep your license up to date?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
To be a successful foster home it is important for every person in the household to approve of an animal being fostered in their home. Is everyone in the home comfortable with this?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If no, please explain		
The FVAWL must conduct a home visit prior to approving any foster application. Is this okay with you and everyone in your household?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If no, please explain		
What time of day would work best for a home visit?	Weekday / Weekend <input type="checkbox"/> <input type="checkbox"/>	AM / PM <input type="checkbox"/> <input type="checkbox"/>
Do you know the limit of animals allowed per residence in your town?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, what is this #?		

## References

Please provide three references, two which are not related to you

Name:	Relationship:	
Address:	City:	State:
Zip code:	Home Phone:	2 <sup>nd</sup> Phone:
Name:	Relationship:	
Address:	City:	State:
Zip code:	Home Phone:	2 <sup>nd</sup> Phone:
Name:	Relationship:	
Address:	City:	State:
Zip code:	Home Phone:	2 <sup>nd</sup> Phone:

By agreeing to foster a dog or cat, the Foster Family will follow all relevant procedures and guidelines in the Fox Valley Animal Welfare League Foster Manual, and will make no decisions or actions regarding the foster's veterinary care (including euthanasia) or placement without contacting the Foster Coordinator. Except in life-threatening situations when FVAWL cannot be reached, veterinary care must be authorized by FVAWL. Otherwise, the Foster Family may be responsible for veterinary costs incurred. In making adoption decisions, FVAWL welcomes the input or recommendations of the Foster Family; however, final decisions regarding adoption rest with FVAWL and AACC.

The Foster Family shall provide the foster dog with a fenced-in yard or other humane means of exercise. The animal shall not be kept constantly chained outside or tied inside. The dog will never be allowed outside a secure fenced area unless on a leash. The foster cat will be kept inside the home at all times. The foster dog or cat must be in the care of the FVAWL -designated foster home at all times unless FVAWL authorizes other arrangements. Foster dogs and cats may not be left in the care of persons not designated by FVAWL as a foster home without the permission of FVAWL. The Foster Family shall treat the foster dog or cat as a household pet and a member of the family and shall never use it for breeding. The Foster Family agrees to provide the dog or cat entrusted to its care with adequate food, water, shelter, affection, socialization, exercise, and medical care. In addition, the Foster Family agrees to return foster dog or cat to FVAWL upon demand.

The Foster Family understands that Fox Valley Animal Welfare League and its representatives have limited information regarding the foster's background or history. The Foster Family will take all reasonable precautions (through the use of crates, leashes, supervision and commands) to ensure that the dog or cat does not run loose, become a nuisance, destroy property, injure or be injured by another animal, or injure or be injured by a human. Interactions between the foster and children under the age of 7 must be supervised by the foster parent and any aggressive behavior by the foster must be reported to FVAWL immediately.

The undersigned (hereafter referred to as "the Foster Family") has agreed to volunteer services or facilities to the Fox Valley Animal Welfare League. The Foster Family acknowledge(s) and understand(s) that the dog(s) and cat(s) in the Fox Valley Animal Welfare League's program may be untrained or require medical care and that the Fox Valley Animal Welfare League makes no representations whatsoever regarding the dog's or cat's temperament, health (including the presence or absence of diseases transmittable to humans or other animals), age, ability, attitude or trainability.

The Foster Family assumes all risk related to working with the Fox Valley Animal Welfare League dog(s) or cat(s). The Foster Family with the intention of binding

(print Member name):
(print name of Member's spouse/significant other if applicable):

and my (our) heirs, legal representatives and assigns, hereby releases the Fox Valley Animal Welfare League, its Board of Directors, members, officers and agents, volunteers and affiliates, The City of Aurora, Aurora Animal Control and Care Facility and its officers and employees, and/or any rescue representative charged or chargeable with responsibility or liability from any and all claims, actions, liabilities, damages, costs, expenses, loss of service, actions/causes of action that Member ever had, or now has, or may have, known or unknown, or that anyone claiming through or under

Member name or names of Member and spouse/significant other – as appropriate):
--

may have or claim to have against the Fox Valley Animal Welfare League, its officers, directors, participants, members, volunteers, and affiliates arising out of any work or activity with any dog or cat connected with the Fox Valley Animal Welfare League or a dog or cat owned by a Fox Valley Animal Welfare League member. If anyone in the Foster Family's household, or any business or social visitor to the household makes a claim, the Member will indemnify, defend, and hold the Fox Valley Animal Welfare League and its Board of Directors, members, officers and agents, volunteers and affiliates, and The City of Aurora, Aurora Animal Control and Care Facility and its officers and employees harmless from such claims and costs.

*I understand and agree to adhere to the terms listed in this contract.*

Name (please print):		Date:	
Signed (if printing, filling out by hand, and mailing):			
Street Address:			
City:	County:	State:	Zip code:
Home Phone:		Work Phone:	
E-Mail Address:		Fax:	
Fox Valley Animal Welfare League Official Signature:			



## Fox Valley Animal Welfare League Foster Home Background Release

In connection with my (our) application to become a foster home for the Fox Valley Animal Welfare League, I understand and agree that background inquiries may be requested by you or on your behalf that will seek information as to my character, the level of care I (we) provide for my (our) companion animals, and stability of my (our) household. Furthermore, I understand and agree that you may request information from my neighbors, various federal, state, county and other agencies and organizations, and our veterinarian regarding my (our) household and the companion animals in my (our) household.

I acknowledge that a faxed or copy of this release shall be as valid as the original. This release is valid for all federal, state, county, and local agencies and private companies.

The following is my (our) complete and legal name, and all information is true and correct to the best of my knowledge.

Name: \_\_\_\_\_

Spouse/Partner: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

County: \_\_\_\_\_ Time at this address: \_\_\_\_\_

*Previous address*

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

County: \_\_\_\_\_ Time at this address: \_\_\_\_\_

\_\_\_\_\_  
Foster home signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Foster home signature

\_\_\_\_\_  
Date