



**Columbiana County Humane Society**

PO Box 101  
 1825 South Lincoln  
 Salem, OH 44460  
 234-575-7177

**Foster Application**

To help us make the best match for you and your family, please complete this form as accurately as possible.

Date: \_\_\_\_\_

Animal Name(s): \_\_\_\_\_

*Columbiana County Humane Society takes in abused, neglected, and abandoned animals; as well as those that are sometimes ordered removed by the courts. We make every attempt to screen our animals for health, behavior, and temperament issues. Certain types of problems may not demonstrate themselves until the animal is in a home environment.*

**For these reasons we cannot guarantee the behavior, health, or temperament of any animal.**

First and Last Name: \_\_\_\_\_

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

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

Primary Phone Number: \_\_\_\_\_ Secondary Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Type of Residence: House Duplex Apartment Condo Mobile Home Other \_\_\_\_\_

Do you: Rent Own Live with friends/family

How long have you lived there? \_\_\_\_\_ First time pet owner, as an adult? Yes No

If renting, landlord's name/phone number: \_\_\_\_\_

Do you currently have other pets? Yes No

Number of adults (>18) in the household and ages: \_\_\_\_\_

Number of children (<18) and ages: \_\_\_\_\_

Please list any animals you currently live with OR have owned in the past three years:

Animal's Name	Age	M/F	Breed	Spayed/Neutered	Still Own?	If no, why?

Who is OR was your veterinarian (name/number if available): \_\_\_\_\_

Does anyone in your household have any allergies to animals? Yes No

Is anyone in your household/family have any medical conditions and/or currently on blood thinners?  
Yes No

<p><b>Describe the type of animal you want to foster (dog, cat, other, breed, size, etc.):</b></p> <p>_____</p> <p>_____</p> <p><b>Sex:</b> Male Female No Preference</p> <p><b>Age:</b> As young as _____ As old as _____ No Preference _____</p>
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Qualities you want in a foster animal (circle all that apply):

- |              |             |       |                   |                 |
|--------------|-------------|-------|-------------------|-----------------|
| Protective   | Easy going  | Shy   | Friendly          | Quiet and calm  |
| Rough-houser | Independent | Quiet | Lots of energy    | Active and busy |
| Gentle       | Playful     | Aloof | Moderately active |                 |

Other: \_\_\_\_\_

Would your foster animal have any of these as neighbors or visitors? (Circle all that apply.)

- Children <10 Teenagers Dogs Cats Horses Small animal (pets) Pet birds Livestock

What are some training needs that you do not wish to encounter (circle all that apply):

- |           |            |           |                        |                       |
|-----------|------------|-----------|------------------------|-----------------------|
| Shy/quiet | Dominant   | Aloof     | Stubborn               | Inappropriate clawing |
| Energetic | Protective | Digging   | Nervous                | Destructive chewing   |
| Escaping  | Aggression | Jumps up  | Doesn't like car       | Too rough with kids   |
| Fear      | Submissive | Confident | Poor litter box habits |                       |

Other: \_\_\_\_\_

Are you willing to train your foster animal if he/she displays some behavioral problems? Yes No

If your foster animal does display any of those behaviors listed above, how will you go about teaching him/her?

- Contact a professional Use a book Google Personal knowledge Other: \_\_\_\_\_

**How would you describe your household?**

Very active   Lots of kids visit   Some activity   Frequent adult visitors   Quiet   Other: \_\_\_\_\_

**How many hours a day will your foster animal spend:**   Indoors \_\_\_\_\_   Outdoors \_\_\_\_\_

**Where will your foster sleep at night?**   Indoors \_\_\_\_\_   Outdoors \_\_\_\_\_

**How many hours a day will your foster animal spend unsupervised?** \_\_\_\_\_

**Where will this foster animal spend most of its time?** \_\_\_\_\_

**What do you do for a living?** \_\_\_\_\_

**What is your source of income?** \_\_\_\_\_

**If employed, employer name and number?** \_\_\_\_\_

**Animals that are foster only are unable to be spayed/neutered until awarded to the Columbiana County Humane Society by the courts. Are you willing to deal with in-heat females and un-neutered males?**   Yes   No

**Are you willing to be a foster-to-adopt?**   Yes   No

**In a shelter environment, it is hard to determine if an animal is housebroken. Will you be able to tolerate accidents in the house?**   Yes   No

**Are all household/family members in agreement about fostering an animal?**   Yes   No

**Have you, or any member of your household/family been subject to legal action for cruelty to, neglect of, or abandonment of an animal?**   Yes   No

**Are you willing to submit to a home check?**   Yes   No

**What are some topics you would like to discuss with your Fostering Coordinator?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I understand that if approved, I will also have to agree to the terms and conditions of the Fostering Contract which is a separate document from the application. I may not take a foster animal home before I agree to the Fostering Contract and approved for fostering.**

**I have read and agree that all statements made in this application are made based on personal knowledge and are made for the purpose to foster one or more animals through the Columbiana County Humane Society.**

**CCHS reserves the right, at our sole discretion, to refuse any applicant for any reason.**

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Signature

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Date

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Signature of Adoption Coordinator

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Date

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**For Columbiana County Humane Society Staff Use Only**

Comments:

Approved

Denied (explain)