



San Diego Humane Society and SPCA  
FOSTER Volunteer Application and Contract

Name: (First) \_\_\_\_\_ (Last) \_\_\_\_\_ Date: \_\_\_\_\_

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

City, State, and ZIP Code: \_\_\_\_\_

Phone (home): \_\_\_\_\_ Cell phone: \_\_\_\_\_

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

Preferred way to reach? \_\_\_\_\_

I have attended a SDHS volunteer orientation: YES \_\_\_\_\_ NO \_\_\_\_\_

If yes – give date: \_\_\_\_\_

1) Why do you want to be a foster caregiver? How did you hear about the program? \_\_\_\_\_

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

2) What previous animal experience, if any, do you have? \_\_\_\_\_

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

3) Which animals, and under what conditions, would you be willing to foster? \_\_\_\_\_

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

4) Which age group are you comfortable fostering? Check all that apply:

0 to 2 weeks? \_\_\_\_\_ (Neonatal care)

2 to 4 weeks? \_\_\_\_\_

4 to 8 weeks? \_\_\_\_\_

5) What animals do you presently have at home? Are you currently looking to adopt? \_\_\_\_\_

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

6) Are your pets' vaccinations current? \_\_\_\_\_

7) Have you had any animals die in the last year? If yes, please explain the circumstances: \_\_\_\_\_

---

---

---

8) Do you have children living at home? If so, please list their ages: \_\_\_\_\_

---

---

---

9) Are all members of your household agreeable to having foster animals in their home? \_\_\_\_\_

---

---

---

10) Do you own or rent your home? \_\_\_\_\_

---

---

---

11) Have you considered the negative aspects of fostering? How will you deal with destructive behavior, messes in the house, frequent feedings, etc? \_\_\_\_\_

---

---

---

" "

12) Are you aware that there are "zoonotic" diseases (diseases that can be transmitted from animals to people?) \_\_\_\_\_

---

---

---

13) How will you isolate foster animals from your own animals? \_\_\_\_\_

---

---

---

14) Are you willing to assume some financial responsibility in fostering an animal? \_\_\_\_\_

---

---

---

15) How will you cope if a foster animal must be euthanized? \_\_\_\_\_

---

---

---

" "

16) If you are currently renting your home or apartment, would you be able to provide written approval to foster from your landlord? If yes, a home inspection conducted by the San Diego Humane Society's Investigations Department is required for all foster volunteers. Are you willing to allow us to complete this inspection?

---

---

---

17) What experience do you have working with animals?

---

---

---

---

---

---

---

18) Please tell us about any pets currently residing in your home (type, age, medical conditions, etc.). If you do have pets, are you able to separate them from your foster animals, if necessary?

---

---

---

19) Do you have reliable transportation? Are you able to bring your foster animals in for Veterinary Services a minimum of once every two weeks or in case of an emergency?

---

---

---

20) Please tell us about your current availability to volunteer. How long will you have to leave the foster animals unattended during the day? Do you have a flexible schedule? Are you able to commit to six months in this program?

---

---

---

---

---

---

---

21) How do you feel about San Diego Humane Society policies regarding spay/neuter? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

22) What activities are you presently involved in (i.e. work, volunteering for other organizations, and other commitments)? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

23) How many hours will the foster animals be left alone during an average day? Is there anyone who will assist you in caring for the animals? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

24) Do you currently own a car, have vehicle insurance, and possess a valid California driver's license? \_\_\_\_\_  
 \_\_\_\_\_

25) Do you have any questions or concerns about being a foster caregiver? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Foster Contract/Agreement

*In signing this foster application/contract, I understand my responsibilities as a Foster Caregiver for the San Diego Humane Society and agree to follow the Society's Foster program policies as stated below:*

1. I am 18 years of age or older.
2. I will return foster animals at the appointed times for exams and adoption.
3. I understand that I am responsible for obtaining medical treatments for my foster animals at the San Diego Humane Society only. I agree to contact the Foster Coordinator directly in order for the Coordinator to schedule medical appointments for my foster animals as necessary.
4. I will provide my foster animals with humane treatment at all times, ensuring that they are being physically and mentally cared for to the best of my abilities.
5. I agree to abide by all the rules set forth in the Foster Orientation/Training Program and the San Diego Humane Society.
6. I hereby fully and completely release the San Diego Humane Society and S.P.C.A., its agents, and employees, from any claim, cause of action or liability, whether known or unknown, arising out of damage a foster animal in my care may inflict upon any person or property, for any illness of the animal, or for the transmittal of any illness or parasite to any other animal or person.
7. I understand a home inspection at my place of residence will be required before beginning my foster care duties. I also understand this home inspection will be scheduled at the availability of San Diego Humane Society's staff, but that every effort will be made to complete my home inspection within a reasonable amount of time after completing my foster care training.
8. In signing this foster application and contract I acknowledge that I have completed all foster training requirements.

**Foster Home Caregiver signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print your name:** \_\_\_\_\_