



100+ Abandoned Dogs of Everglades Florida
877-506-8100 100plusabandoneddogs@gmail.com

FOSTER QUESTIONNAIRE

Name: _____ Email: _____

Address: _____ Phone: _____

_____ Alt. Phone: _____

Are you looking to foster only, or are you looking to adopt eventually? _____

Other People in the home - Ages & Relationships, home dynamics (active, calm, etc.):

What is the work schedule of the people in the home?

How many hours per day would the pet be left alone? _____

Pets in the home:

1. Type (ie. dog, cat, bird, etc.) _____ Age: _____ Weight: _____

Vaccinated: Y / N Spayed/Neutered Y / N

2. Type (ie. dog, cat, bird, etc.) _____ Age: _____ Weight: _____

Vaccinated: Y / N Spayed/Neutered Y / N

3. Type (ie. dog, cat, bird, etc.) _____ Age: _____ Weight: _____

Vaccinated: Y / N Spayed/Neutered Y / N

Are you in a house, condo, townhouse, or apt.? _____ Own or Rent? _____

Do you have a Pool? Y / N

Do you have a fenced yard? Y / N If YES, what type of fence and how high is it?

What type of pet(s) are you looking to foster _____ DOG _____ CAT

Do you have a preferred age / sex / size / energy level of the pet you would like to foster?

Would you like a dog who is (CIRCLE ALL APPLICABLE ANSWERS)

VERY ACTIVE - ACTIVE - CALM & MELLOW - GOOD WITH CATS -
GOOD WITH SENIOR CITIZENS - GOOD WITH KIDS UNDER 8 -
GOOD WITH KIDS OVER 8 - OTHER _____

Have you fostered an animal before? Y / N If YES, please give details.

**If you are interested in fostering a dog, do you have experience with dogs?
Please explain.**

**If you are interested in fostering a cat, do you have a room where the cat can live until
he/she is acclimated to the other pets in the home? Y / N**

Do you have any upcoming trips planned? If so, when and for how long?

Date you are available to bring a pet into your home: _____

Age of dog / cat you are looking for: (CIRCLE ALL APPLICABLE ANSWERS)

*Mom & Nursing Babies * 8 wk - 6 mo. * 6 mo. - 1yr. * 1-6 years * 6 years + * any*

Would you consider fostering (CIRCLE ALL APPLICABLE ANSWERS)

Blind Animal Deaf Animal Hypoallergenic animal only Pregnant animal Amputee
Animal with ongoing medical needs Fospice Care

When you are not home, where will the pet stay?

____ Crate ____ Loose in house ____ Gated area in house ____ Yard ____ Other

Will you commit to:

____ No Training ____ Some Training ____ A lot of training

Additional information you think we should know: _____
