



**One Dog at a Time Rescue  
Foster Application**

P.O. Box 76, Warsaw, IN 46581-0076

[ODTR01@gmail.com](mailto:ODTR01@gmail.com)

*(Applicants must be 21 years of age or older.)*

Please fill out the application and email or mail to One Dog at a Time (ODTR). See above.

Name \_\_\_\_\_ Date \_\_\_\_\_

Street Address \_\_\_\_\_ Phone Number(s) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Home \_\_\_\_\_

Email Address \_\_\_\_\_ Cell \_\_\_\_\_

There are no wrong answers—we need the information to determine dog that would best fit the person/family. All applications will be kept on file for one (1) year or unless you notify us that you no longer are able to foster.

A home visit will be performed before any animal will be placed.

1. Have you ever given up/relinquished an animal before? Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Do you have experience with sick or injured animals? If so describe: \_\_\_\_\_

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

3. Do you have experience with older animals? Yes  No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Do you have experience with newborn/nursing moms and young animals? Yes  No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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5. We periodically have dogs who are not really wild, but who need socializing. Are you willing to work with this type of dogs? Yes  No

If yes, briefly describe your approach to socializing these dogs or puppies. \_\_\_\_\_

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6. Are you willing to foster special needs dogs? Yes  No

Please check the category/categories you would consider fostering:

- Bottle Babies Needs Socializing  
 Pregnant  
 Heartworm Positive  
 Needs Medication  
 Wound Care  
 Special Food Needs  
 Other \_\_\_\_\_

7. Do you understand the need to initially isolate the foster animals from your other animals?  
Yes  No

8. Do you have the space and ability to isolate the foster animal from other animals, if necessary? Yes  No

9. Are you able and/or willing to bring the foster animal to adoption events? Yes  No

10. Are you willing to bring the animal to a potential adoptive parent's residence? Yes  No

11. Are you able and/or willing to take the animal to one of our veterinary clinics if necessary?  
Yes  No

12. What type of home do you live in?

- House  
 Apartment  
 Condo  
 Townhouse  
 Mobile Home  
 Other (please explain) \_\_\_\_\_

13. Do you own or rent your home? Own  Rent

*Home ownership will be verified, and if you rent, we will double check with the landlord.*



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14. If you rent, does your landlord allow you to have animals? Yes  No

Please list landlord's name and phone number.

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15. Do you have regular visitors (human or animal) to your home? Yes  No

Please explain and indicate ages (if applicable). \_\_\_\_\_

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16. Do you have a fenced yard for a dog? Yes  No

If yes, what type of fence and how high is the fence? \_\_\_\_\_

If no, how would you contain the animal when it needed to go outside? \_\_\_\_\_

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17. Would you need a crate for crate training of a dog? Yes  No

18. Does everyone living in your household agree to foster a pet at this time? Yes  No

19. Please list all the members of your household. Include name, age, and relationship. Also note if anyone in your household has ever HARMED an animal.

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20. Is anyone in your household allergic to dogs? Yes  No  Don't Know

21. Are you willing to keep the animal/animals until a good forever home is found? Yes  No

If yes, what is the maximum amount of time you could foster an animal? (Some of the animals will be short term [1-2 weeks] and some may be longer. Those animals that are being fostered for situations such as military service may be a much longer commitment time. The less we have to move an animal, the better so please be honest in this answer. Again, there is no right or wrong answer. We just want the best placement possible for the animal and the foster parent.)

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22. If the foster does not work out, are you willing to continue fostering the animal until another suitable home is found? Yes  No

23. Who will be the primary caregiver for your foster(s)?

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24. Where will the animal be kept when you are not home?

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25. What arrangements will be made for the animal when you are out of town?

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26. Are you aware of the major infectious diseases of dogs? Yes  No

27. Have you ever known of an animal to get Parvo at your current residence? Yes  No

If yes, when? \_\_\_\_\_

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28. Are your animals current on their vaccinations? Yes  No  NA

If no, please explain: \_\_\_\_\_

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29. Have you ever fostered for another rescue group? Yes  No

If yes, please describe your experience: \_\_\_\_\_

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30. Are you willing to work with an animal that has behavior problems? Yes  No



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31. Are there other animals currently in the home? Please note detail below.

Type	Age	Temperament	Altered	Vaccines	Get Along With Dogs/Cats

32. How will you handle a dog that chews inappropriate items?

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33. How will you handle an animal with inappropriate elimination problems?

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34. How will you handle a dog that scratches or bites you, a child, or another person?

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35. Will you let young children interact with the animal without adult supervision? Yes  No

36. What precautions would you take to properly introduce a new dog to your home if you have others animals (cats, dogs, birds, rabbits, etc.)?

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37. Please list the name and phone number of each vet where your animal(s) have received care over the last five (5) years. (Include the owner name[s] under which the records can be found.)

Veterinarian Name \_\_\_\_\_  
Clinic Name \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Veterinarian Name \_\_\_\_\_  
Clinic Name \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

*We will verify this information with your current vet. Your signature on this application gives us the authority to do so.*

Please provide three references (preferably not related to you and not an ODTR representative).

Name \_\_\_\_\_  
Phone Number \_\_\_\_\_ Relationship to You \_\_\_\_\_

Name \_\_\_\_\_  
Phone Number \_\_\_\_\_ Relationship to You \_\_\_\_\_

Name \_\_\_\_\_  
Phone Number \_\_\_\_\_ Relationship to You \_\_\_\_\_

38. Have you ever had an application rejected for adoption of an animal from a rescue/animal control facility/shelter? Yes  No

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

39. Does your homeowners/rental insurance have any restrictions for any specific breeds?  
Yes  No

If yes, please specify: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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40. If the foster animal would suffer an injury (whether accidental or not) while in your care, ODTR would require that you be responsible for half of the veterinary care bills to treat the dog. Do you have a problem with this? Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

41. ODTR will require that you send weekly updates on the animal's health, problems, likes, dislikes, or anything else you would like to report. This report will be given to the adoptive family to help in the transition. Would this be a problem for you? Yes  No

42. Do you have a limit on the size of dog you want to foster? (Check all that apply.)

- Puppy
- Small (1-30 pounds)
- Medium (31-70 pounds)
- Large (over 70-120 pounds)
- X-Large (over 120 pounds)
- No Preference

43. Do you have any other restrictions on the type of dog you WILL NOT foster? (Example: breed, altered/unaltered, indoor/outdoor, needs medicine, needs training, etc.)

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

44. Do you have a preference on the breed of dog you will foster?

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

45. Is there anything you feel that we should know about your fostering an animal?

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

46. Do you have any concerns that you would like to address? Yes  No

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



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**Foster Agreement**

*Please read the following carefully, and initial after each paragraph.*

We would not knowingly place an animal with a serious health condition. BUT it may not be known if a stray or previously-owned animal has been exposed to an illness or has a hidden genetic disorder. Under these circumstances, we cannot guarantee the health of this pet.

\_\_\_\_\_

The information I have given in this application is correct to the best of my knowledge. I understand that ODTR reserves the right to approve or reject this application. Applications are often approved pending current pet vaccinations and landlord approval. In fairness to the animals, the selected pet may be given to another foster parent if it cannot be “held” to allow for time to take care of these items. An individual animal will not be taken out of “foster home needed status” and held for an extended period of time. \_\_\_\_\_

I understand, as previously explained, that you will be contacting my veterinarian for vaccination and health history of the pets that I currently own or have owned. I release my veterinarian to provide that information to you. I am aware that if prior to placement of a pet from ODTR, my currently-owned pets must be current on needed vaccines. To protect my animals at home, if they are not current, same species adoptions will require a waiting period for my own pets to gain immunities provided by the vaccines. \_\_\_\_\_

If a suitable adoptive home is found for the animal you are fostering, you will be given first opportunity to adopt the animal. You will have 24 hours from notification that an adoptive home has been found for the animal to notify ODTR that you wish to adopt the animal yourself. If you do not wish to adopt the animal, you will be required to retain the animal until the adoption process is completed. HOWEVER, this adoption preference DOES NOT extend to friends or family members. They must fill out an application form, be placed in the adoption queue for that animal, and follow all ODTR adoption procedures. \_\_\_\_\_

ODTR will require that you send weekly updates on the animal’s health, problems, likes, dislikes, or anything else you would like to report. This report will be given to the adoptive family. \_\_\_\_\_

Owner/foster family will be asked to bring the dog to adoption events and to an adoptive parent’s residence. \_\_\_\_\_

If the foster animal would suffer an injury (whether accidental or not) while in your care, ODTR would require that you are responsible for half of the veterinary care bills to treat the dog.

\_\_\_\_\_

The owner surrender/foster family may decide to keep the animal. If this occurs, the owner/foster family MUST notify ODTR immediately on making the decision. The owner/foster family MUST then sign an ODTR Adoption Contract and pay ODTR an adoption fee. \_\_\_\_\_

Foster home should be experienced in the basic care and handling of the type of animal to be fostered. \_\_\_\_\_





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Foster home should be qualified and have adequate resources and experience to provide for the medical and care requirements of the animal. \_\_\_\_\_

Foster home should have the space to separate/isolate foster animals from other animals in the home. \_\_\_\_\_

Foster home will contact One Dog at a Time designate for permission before taking a foster animal to a veterinarian, if possible. IF AN EMERGENCY, medical treatment should be sought IMMEDIATELY and ODTR contacted as soon as possible. \_\_\_\_\_

Foster homes will keep detailed records of any medical treatments and care given to the foster animal. \_\_\_\_\_

All foster home current resident pet(s) must be up to date on vaccinations. \_\_\_\_\_

If the foster home resident pet(s) contracts a disease or is injured by a foster animal, ODTR will not be liable for any expenses associated with the foster home resident pet(s). \_\_\_\_\_

If the foster animal becomes lost or runs away, the foster home must immediately contact ODTR, the local police department, and animal control agency. \_\_\_\_\_

ODTR has the right to inspect the foster home or to request the return of any foster animal(s) at any time \_\_\_\_\_

Foster animals will be assigned to foster homes at the discretion of the ODTR Foster Coordinator. \_\_\_\_\_

The foster home will sign the ODTR Volunteer Form and ODTR Foster Application before taking any foster animal to their home. \_\_\_\_\_

This application and all paperwork regarding fostering ODTR animals is the sole property of ODTR. \_\_\_\_\_

The foster family will be given a first aid kit. It is the foster family's responsibility to keep the kit stocked. Once the foster family no longer wishes to foster for ODTR, the kit MUST be returned to ODTR completely stocked. . \_\_\_\_\_

If the foster family does not pay the adoption fee to ODTR and if they decide to keep the dog in their possession, ODTR has the right to take legal steps to have the dog removed and given to ODTR. The foster family WILL be responsible for ALL legal fees associated with such action.  
\_\_\_\_\_

If any misrepresentations have been made, ODTR reserves the right to demand the immediate return of any foster animal back to ODTR . \_\_\_\_\_



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I certify that the above information is true and complete to the best of my ability. I further authorize that may contact any and all of the listed references, and I authorize the release of information from any of the aforementioned references to ODTR.

I have read and understand the foster policies of ODTR and agree to them. I further agree to hold harmless ODTR AND/OR any representative of ODTR for any injury sustained to me, family members, pets, and/or friends as a result of having fostered this animal.

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Foster Signature

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Date

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Foster Signature

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Date

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ODTR Representative

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Date