



**RANCHO COASTAL HUMANE SOCIETY
FOSTER VOLUNTEER APPLICATION
TEEN FOSTER PROGRAM**



Thank you for your interest in the TEEN FOSTER PROGRAM!!!!
Rancho Coastal Humane Society is excited to have you and your teen
be a part of this life saving venture.

Please fill out the attached applications.

The **Pink** portion is to be filled out by the parent(s) or guardian

The **Bright Green** portion is to be filled out by the teen

Please make sure the application is complete and legible!
You will be contacted via e-mail by the Foster Coordinator once your
application is reviewed.

If you have any questions please contact:

Cat Schneider, Foster Coordinator

760-753-6413

Foster@sdpets.org



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-FOR OFFICE USE ONLY-

Received: _____ Contacted: _____ Orientation completed: _____
Approved: _____ Date: _____ Preferred program: _____

Notes: _____

THIS SECTION TO BE FILLED OUT BY PARENT

GENERAL INFORMATION

Date: _____ Name: _____

Telephone Home: (_____) _____ Telephone Cell: (_____) _____

Email: _____

Address: _____
Street _____ City _____ Zip _____

Employer: _____ Position: _____

Are you.. (Check one) Under 21 21-25 26-35 35-54 55+

ABOUT YOU

How did you hear about our Foster Program? _____

In addition to your love of animals, why do you want to become a RCHS foster volunteer?

Describe your experience with animals: _____



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Have you fostered for other animal organizations? Y N

If yes, which organization(s)? _____

HOUSEHOLD INFORMATION:

Do you rent or own? _____ House Townhouse/condo Apartment

Does your lease allow for pets? _____ What kind? _____

How many? _____ Landlord's Name: _____ Number: _____

How many adults live in residence? _____ Children? _____ Ages: _____

Do you have any pets? _____ If yes, complete below information about *each* pet:

1. Name: _____ Species: _____ Sex: _____ Altered? Y N
Dog-friendly? Y N Cat-friendly? Y N Date of last vaccination: _____

2. Name: _____ Species: _____ Sex: _____ Altered? Y N
Dog-friendly? Y N Cat-friendly? Y N Date of last vaccination: _____

3. Name: _____ Species: _____ Sex: _____ Altered? Y N
Dog-friendly? Y N Cat-friendly? Y N Date of last vaccination: _____

4. Name: _____ Species: _____ Sex: _____ Altered? Y N
Dog-friendly? Y N Cat-friendly? Y N Date of last vaccination: _____

5. Name: _____ Species: _____ Sex: _____ Altered? Y N
Dog-friendly? Y N Cat-friendly? Y N Date of last vaccination: _____

How many hours are your animals left unsupervised? _____

How are they contained when left unsupervised? Crate Lead Chain

Rope Invisible Fence Kennel Fenced in yard Other: _____

How many hours are your animals inside? _____ Outside? _____

Where do your animals sleep? _____



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Does anyone in your household have allergies to animals? Y N

If yes, please explain: _____

Does your house have a fenced-in back yard? Y N If yes, what type?

Block Wood Chain Height of fence? _____

Are there any low points in the fence? _____ If yes, what is the height of the lowest point of the fence? _____

Would you allow your pets and/or children to interact with the foster animal(s)? Y N
Please explain: _____

Would you agree to our staff visiting your home prior to or during the fostering? Y N
If no, please explain: _____

FOSTERING INFORMATION:

For what program would you like to foster? Animal Safehouse General Shelter
 Teen Foster

What types of animals are you willing to foster (please check all that apply)?

Kittens without mother* Kittens with mother* Older kittens Cats
 Puppies without mother* Puppies with mother* Older puppies Dogs
 Special-needs (emotional and/or physical) other (specify): _____

How many animals are you willing to foster? _____

How long will the foster animal(s) be left unsupervised? _____

Please describe the area where the foster animal(s) will be kept and cared for: _____

Where will the foster animal(s) sleep? _____

Animals may need to be fostered for a minimum of a few days to up to several months. What is the maximum time you are able to foster? _____

Sometimes animals become ill while in foster care. If this situation arises, would you be willing and able to administer medication? Y N Not sure

Do you have experience administering medicine to animals? Y N
If yes, please explain: _____



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Have you ever raised a kitten or puppy? Y N If yes, how many times? _____

*May require bottle-feeding up to every two hours, including overnight.

Please specify any additional information you would like to receive:

- House-breaking Litter-box training Crate training Bottle-feeding Socialization
 Training tips Animal-safety for children Animal Safehouse Program Other: _____

PERSONAL REFERENCES:

Please provide two personal references, only one of which may be a relative. Please do not include household members.

Name: _____
Phone: _____

Relationship: _____
Email: _____

Name: _____
Phone: _____

Relationship: _____
Email: _____

Please note: Your application will be reviewed as soon as possible. The Foster Coordinator will contact you as soon as possible, regarding your application. Thank you for your interest in being a foster volunteer!

Animals available for adoption must be placed by Rancho Coastal Humane Society staff only. Any interested adopter must complete a profile and meet with an adoption counselor.

Other ways to submit completed application

Mail to:

Rancho Coastal Humane Society, ATTN: Foster Coordinator
389 Requeza Street, Encinitas, CA 92024

Email to: foster@sdpets.org

Fax To:

(760) 753-6664 Attention Foster Coordinator

You may also drop off the application to the Front Desk at the Rancho Coastal Humane Society



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Teen Foster Program (to be filled out by the teen requiring service hours)

Name: _____

Phone: _____ **Email:** _____

Are you OK with sending & receiving texts/photos from the foster coordinator?

Why did you pick RCHS to complete your service hours?

What school or organization do you need service hours for?

Describe any animal experience you have and what you would like to gain from this opportunity.

Explain your plan for care of the foster animals when in school and/or extra-curricular activities.

Are you available to come in for twice weekly health checks for your foster animal(s) at RCHS?