

LOLIN, INC
Foster Application
PO Box 237
Noblesville. IN 46061-0237
www.lolin.org

Personal Information:

Date: _____

Full Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Day Phone: (____) _____ Evening Phone: (____) _____

Cell Phone: (____) _____ Email address: _____

Applying to:

(____) Temporary foster (i.e. pull from longer distance shelter and hold until transport)

(____) Regular foster

How long have you lived at your current residence? _____

If less than one year, please provide address of your previous residence:

- o Street address: _____
- o City: _____ State: _____ Zip: _____

Environment:

Which of the following best describes your current residence?

(Please check only one response.)

- [] I/We own a single home
- [] I/We rent/lease a single home*
- [] I/We own a condo/townhouse
- [] I we own a twin/duplex
- [] I/We rent/lease a condo/townhouse*
- [] I/We rent/lease a twin/duplex*
- [] I/We rent an apartment*
- [] I/We own or rent a mobile home/trailer*
- [] Other _____

****PLEASE NOTE: If you rent/lease, we will need a copy of your lease, or a letter from your landlord, stating that you are allowed to have large dogs. Please obtain it and send with the application. Thanks!**

How many people, including you, live in your home? _____

Please list all people below (use more paper if needed)

Describe your home/yard and how you will provide for the exercise needs of your foster(s).

Approximately how long will your foster be home along on an average day?

(Please check only one response)

- Less than 3 hours
- 3 to 7 hours
- 7 to 9 hours
- 9+ hours

If you answered more than 9+, what arrangements will you make for the elimination needs ("Potties") and exercise needs of your foster on these days?

Are you a member of any animal-related or animal-welfare-related organizations, clubs, cyber groups, Internet bulletin boards? *If so, please list/elaborate below.*

Have you or anyone in your home ever been investigated for animal neglect or cruelty?

No

Yes

If yes, please explain: _____

Have you or anyone in your home even been turned down to adopt or foster an animal from a shelter or rescue?

No

Yes

If yes, please explain: _____

Pets/Vetting:

Please list all current pets. If needed, make extra copies of this page and attach. Thank you.

1. Name: _____ Type of Pet: _____
 - Age: _____ Length of time owned: _____
 - Sex? _____ Spayed/Neutered? If not, explain: _____
 - If applicable, what do you use for heartworm prevention? _____
 - Where is this animal kept? _____

2. Name: _____ Type of Pet: _____
 - Age: _____ Length of time owned: _____
 - Sex? _____ Spayed/Neutered? If not, explain: _____
 - If applicable, what do you use for heartworm prevention? _____
 - Where is this animal kept? _____

3. Name: _____ Type of Pet: _____
 - Age: _____ Length of time owned: _____
 - Sex? _____ Spayed/Neutered? If not, explain: _____
 - If applicable, what do you use for heartworm prevention? _____
 - Where is this animal kept? _____

4. Name: _____ Type of Pet: _____
 - Age: _____ Length of time owned: _____
 - Sex? _____ Spayed/Neutered? If not, explain: _____
 - If applicable, what do you use for heartworm prevention? _____
 - Where is this animal kept? _____

5. Name: _____ Type of Pet: _____
 - Age: _____ Length of time owned: _____
 - Sex? _____ Spayed/Neutered? If not, explain: _____
 - If applicable, what do you use for heartworm prevention? _____
 - Where is this animal kept? _____

Have you owned any other pets within the past ten (10) years other than those previously listed?

NO

YES - Please list name, breed and sex of each and explain what happened to all previously owned pets and the circumstances (i.e., died from _____, gave away because _____, etc.)

Do you currently have a veterinarian or is there a veterinarian whom you've used in the past?

NO

YES - Please provide the following information, using additional paper if needed:

Vet's Name #1: _____

Address: _____

Phone Number: _____ Length of Time Vet Used: _____ years
(Please include area code)

Vet's Name #2: _____

Address: _____

Phone Number: _____ Length of Time Vet Used: _____ years
(Please include area code)

Please be aware, unless you are a distance from any of the vets with whom we currently have working relationships, you may be required to utilize a vet other than your own for your foster dog. We have working relationships with many vets.

Space for any additional notes/explanations needed about vetting:

Experience:

Have you owned a Labrador Retriever before? *(If YES, please provide us with a brief history about that dog(s). Please provide all relevant experience with Labs)*

NO

YES

Have you crate-trained a dog before? Do you own a crate?

What dog training experience do you have? Have you taken or taught classes, or done any advanced training? *(Agility, Dock, etc.)*

Have you ever fostered a dog for an animal organization before? *(If YES, please provide list the animal organization contact information, including their website address if known.)*

NO

YES

Are you comfortable with dogs that may have issues? *(Examples include: Shy/timid, under-socialized, Heartworm treatment, pregnant)* If so, please explain.

Do you have friends or family in a field of animal care/training or animal welfare? If so, please provide their name(s) and phone number(s).

Personal References:

Please list the name, address, phone numbers (with area code) and email (if applicable) of three (3) personal references, and your veterinarian.

1. Reference Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone, with area code: _____
Email Address: _____
2. Reference Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone, with area code: _____
Email Address: _____
3. Reference Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone, with area code: _____
Email Address: _____
4. Vet's Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone, with area code: _____
Email Address: _____

Applicant's Signature

(Must be over 18)

Date

Please email completed applications to:

foster@lolin.org

If you prefer, you may print the application to fill it out. You can then mail the completed application to the PO Box indicated at the top of the first page. Please remember to sign the application if you choose to mail it to us. Thank you!