



Anne Arundel County Police Department  
 8495 Veterans Highway Millersville, Maryland 21108  
 (410) 222-8050  
[www.aacounty.org/police](http://www.aacounty.org/police)



*Timothy J. Altomare*  
 Chief of Police

## FOSTER CARE PROGRAM APPLICATION

FOR ANNE ARUNDEL COUNTY ANIMAL CONTROL

Please carefully fill out this form, providing explanation as necessary, so that we can match you with a foster animal that best fits your lifestyle. You must be at least 18 years of age and a county resident to foster animals for Anne Arundel County Animal Control.

### APPLICANT'S INFORMATION

Full Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Previous Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Social Security #: \_\_\_\_\_ SEX:  Male  Female RACE: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Work Phone: \_\_\_\_\_ May we call you at work?  Yes  No

Veterinarian's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

How did you hear about our Foster Care Program?

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

Briefly tell us why you want to foster for Animal Control:

*Nationally Accredited Law Enforcement Agency*

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**LIVING INFORMATION**

1. Do you live in a:  House  Townhouse  Apartment  Condo  Other

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

How long have you lived at this address? \_\_\_\_\_

If rental, please provide the name and phone number of the landlord:

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If rental, how many pets are permitted? \_\_\_\_\_

List any pet weight restrictions: \_\_\_\_\_

List any dog breed restrictions: \_\_\_\_\_

3. How many adults live in your household? \_\_\_\_\_

Please list the names, relationship, and best contact information for all other adults who live in the household:

<u>Name</u>	<u>Relationship to Applicant</u>	<u>Phone Number</u>
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4. Do children live in your household under 18 years of age?  Yes  No

(This applies to children in residence full-time, part-time, and for weekend visits.)

If yes, please list the names and ages of the children:

<u>Name</u>	<u>Age</u>
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5. Number of hours someone over 18 years is at home during a 24-hour period: \_\_\_\_\_

6. Does anyone in your household have allergies to animals?  Yes  No

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

7. Who will be responsible for the care of this animal? \_\_\_\_\_

## FOSTER PET INFORMATION

1. Are you willing to foster a pregnant animal or a nursing mother?  Yes  No

If yes, a dog, cat or other animal? \_\_\_\_\_

If yes, are you willing to incur the expense of puppy/kitten formula, puppy/kitten growth food, and puppy/kitten supplies?  Yes  No

Are you willing to foster puppies to the age of 9 weeks?  Yes  No

Are you willing to foster kittens to the age of 11 weeks?  Yes  No

2. Please check if you can foster an animal with special needs:

On daily medication  Recovering from surgery  Recovering from illness

Orphaned kittens needing frequent bottle feedings

3. Are you willing to administer medications or treatments?  Yes  No

4. Are you familiar with techniques to socialize a shy animal?  Yes  No

5. Are you willing to work with a difficult animal that has been abused, neglected or stressed?  Yes  No

6. Are you familiar with crate training?  Yes  No

If yes, are you willing to crate a foster dog?  Yes  No

If not, please explain why not: \_\_\_\_\_

7. Please indicate your preference in the type of foster animal(s):

Kittens  Cat  Puppies  Dog  Rabbit  Other \_\_\_\_\_

8. Do you understand that Anne Arundel County Animal Control can perform unannounced home inspections of foster care homes at any time?  Yes  No

9. Do you understand that any foster animal(s) remain the sole property of Anne Arundel County Animal Control, that you must abide by any decisions made regarding their care and treatment, and that fostering does not grant you any sort of ownership over the foster animal(s)?  Yes  No

10. Do you accept responsibility for picking up the animal(s) from Anne Arundel County Animal Control when they are released for fostering?  Yes  No

11. Do you agree to return the foster animal(s) as instructed upon request or if you are no longer able to adequately care for them?  Yes  No

**MISCELLANEOUS INFORMATION**

1. All dogs and cats at home must be up-to-date on their rabies vaccinations and have a current Anne Arundel County license with Animal Control. Please list the pets that currently reside in your household (use back if necessary):

Name – Species – Breed – Age – Sex – Spayed/Neutered? – AA County License #

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2. If you have animals, are they:  Indoor Only  Indoor/Outdoor  Outdoor Only

3. Do you have a fenced-in yard?  Yes  No

4. Have you ever had a pet die at an early age or due to an accident?  Yes  No

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

5. Have you ever fostered animals for any animal shelter/rescue group?  Yes  No

If yes, with whom, when and where? \_\_\_\_\_  
\_\_\_\_\_

6. Do you have a separate space where you could keep a foster animal?  Yes  No

If yes, where? \_\_\_\_\_  
\_\_\_\_\_

7. Have you read Anne Arundel County's Code of Animal Control Laws?  Yes  No

8. Do you understand the Animal Control Laws?  Yes  No

9. Do you agree that all information given on this form is truthful?  Yes  No

\_\_\_\_\_  
**SIGNATURE OF FOSTER CARE GIVER**

\_\_\_\_\_  
**DATE**