

South Florida Siberian Husky Rescue, Inc. **Volunteer / Foster Application**

Please take the time to complete this form and fax or return it to the contact information below. After reviewing the information you provide, one of our volunteer representatives will contact you regarding your time availability and the volunteer activities for which you have expressed an interest.

If you are interested in becoming a foster home, there are specific questions on this form which must be completed (marked with an asterisk *). Upon approval to be a foster home a separate contract must be signed.

CONTACT INFORMATION:

Name: _____
Street Address: _____
City: _____ All fosters must live in the State of Florida Zip Code: _____
Home#: _____ Best time to call: _____
Work# _____ Best time to call: _____
Cell#: _____ Best time to call: _____
Email: _____ Do you check often? Yes _____ No _____
(Majority of contact is done through email)

Occupation: _____ / Spouse/Partner: _____
May we call you on advice within your profession? Yes No

COMMUNITY SERVICE: Because of the abundance of requests for Community Service hours, we can only accept those that are knowledgeable OR and/or own a Siberian Husky.

How many hours do you need? _____ How old are you? _____ Do you own transportation? _____

PAST EXPERIENCE & TRAINING:

Have you ever been bitten or attacked by a dog? Yes _____ No _____

Did the bite require medical attention? Yes _____ No _____

If the bite required medical attention, please explain the situation: _____

Are you comfortable approaching a dog you don't know? Yes _____ No _____

Do you understand that dogs may be unpredictable and the SFSHRI cannot guarantee that a dog we are attempting to rescue may not become aggressive? Yes _____ No _____

Are you willing to assume the risks involved with working with animals who are sometimes frightened and who are in unfamiliar surroundings and the possibility that the dog may become aggressive and/or bite you or a companion? Yes _____ No _____

Do you have experience/training in any of the following dog-related areas of work? (check all that apply)

Breeding Grooming Animal Rescue Training Vet Tech

Other experience and skills that would help you in rescue: _____

Please describe the nature and extent of above work/training experience? _____

Please explain or describe any other information, which you feel is relevant or important about yourself: _____

What type of services have you performed in the past, or are performing now for other volunteer agencies? _____

Please list dog clubs or rescue organization memberships past and present: _____

SIBERIAN HUSKY EXPERIENCE:

Ownership:

Have you ever owned a Siberian Husky? Yes _____ No _____

If you have owned a Siberian Husky, please describe: _____

Breed Research (Check all that apply):

Have you done any research on the breed? Yes _____ No _____

I have owned a Siberian Husky

I have done research on the internet

A family member owns a Siberian Husky

I have talked to people who own Huskies

I have read Book(s) about the breed

I have read the SFSHRI description

A friend owns a Siberian Husky

Other

If you have indicated that you have done other research, please describe: _____

PET OWNERSHIP:

Past Canine Ownership: (If you have never owned dogs, please skip this portion of the application)

How many dogs have you owned in the past 10yrs? _____

Briefly describe what happened to the dog(s) you no longer have: _____

Current Canine Ownership: (If you do not currently have dogs, please skip this portion of the application)

How many dogs do you currently own? _____

If you currently have dog(s), please indicate the sex, age, and breed for each dog:

Dogs Name: _____ Breed: _____

Sex: _____ Age: _____

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Sex: _____ Age: _____

Dogs Name: _____ Breed: _____

Sex: _____ Age: _____

Dogs Name: _____ Breed: _____

Sex: _____ Age: _____

Past Feline Ownership: (If you have never owned cats, please skip this portion of the application)

How many cats have you owned in the past 10yrs? _____

Briefly describe what happened to the cat(s) you no longer have: _____

Current Feline Ownership: (If you do not currently have cats, please skip this portion)

How many cats do you currently own? _____

Are your cat(s) declawed? Yes _____ No _____

Is your cat an outdoor or indoor cat? Yes _____ No _____

Has he/she ever interacted with dogs? Yes _____ No _____

Please describe your cat(s) interaction with dogs: _____

Please enter any additional comments regarding yours cat(s) here: _____

Other Pet Ownership: (if you do not currently own pets other than dogs/cats, please skip this portion)

Do you currently own any other animals? Yes _____ No _____

If yes, please list: _____

Veterinarian Information:

Do you have a regular veterinarian? Yes _____ No _____ If yes, answer questions below:

May we call your Vet for a reference? Yes _____ No _____

Dr's name: _____

Office/Practice Name: _____

Address: _____

Phone#: _____

Are your pets current on annual vaccines? Yes _____ No _____

Are your current pets spayed/neutered? Yes _____ No _____

Do you use a Heartworm Preventative on your pets? Yes _____ No _____

If yes, what brand? _____

Do you use Flea deterrent on your pets? Yes _____ No _____

If yes, what brand? _____

VOLUNTEERING:

Please describe why you are interested in volunteering for a group dedicated to rescuing dogs, particularly the Siberian Husky? _____

Events: Are you interested in participating in various SFSHRI events? Yes / No

Availability: (Check all that apply)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

AM (8am-11am) PM (12pm-?)

Home checks: Would you like to take part in the adoption process of a rescue dog by performing home checks on potential adopters? Yes / No

Availability: (Check all that apply)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

AM (8am-11am) PM (12pm-_____)

Transportation: Interested in transporting a dog from a shelter>vet / from foster>adoptive home? Yes / No

Availability: (Check all that apply)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

AM (8am-11am) PM (12pm-_____)

Are you willing to accept any risk involved in transporting a dog inside your vehicle? Yes _____ No _____

Identifying Huskies / Picture Taking: Do you own a digital camera? Would you be available to ID and take photos of a dog that is considered to be a husky? Yes / No

Availability: (Check all that apply)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

AM (8am-11am) PM (12pm-_____)

FOSTERING: Additional questions for foster applicants only

Please complete this section if you are interested in becoming a foster home. This would include all foster home types: temporary, short term, surgical, behavioral, and continual. If you are not interested in becoming a foster home please skip to the next section.

Type of Fostering: Please indicate which types of fostering you are interested in: (Check all that apply)

Temporary: Approx. 1-3 days, these foster homes would be needed in cases where there is a timing issue associated with transport or for a scheduled adoption.

Short Term: Approx. 1-2 weeks, these foster homes would be needed in cases of vacations by other foster homes, some timing issues.

Continual: These foster homes are willing to foster a dog until such time as the dog is adopted. The time may vary anywhere from 1 day to 6 months. The foster home will then have the opportunity to foster another dog once the original dog has been adopted.

Fostering Facilities:

Does your home have an outside kennel or other facilities for the temporary housing of restricted dogs? Yes / No

If yes, please describe: _____

If you currently own a dog(s), is it necessary for the foster dog to get along with them? Yes / No

If no, does your home have any means for separating a foster dog from your dog(s)? Yes / No

If yes, please describe: _____

If you currently own a cat(s), is it necessary for the foster dog to get along with them? Yes / No

If no, does your home have any means for separating a foster dog from your cat(s)? Yes / No

If yes, please describe: _____

Fostering Preferences:

Do you have any sex preference for the dog(s) you will foster? Male Female Either

Age preference: (check all that apply) Under 1yr 2-3yr 4-5yr 6-7yr 8-9yr 10+yr

PLACE OF RESIDENCE INFORMATION:

Dwelling Information:

Do you Own Rent

Any deed pet restrictions in your community? Yes / No

Are pets over 50lbs allowed to reside in your rental? Yes / No

Landlord Reference: (If renting, please list the landlord's contact information)

Name: _____

Phone#: _____ Best time to call: _____

(We will call the above person/s listed and verify that the above dwelling information you provided is correct.)

Specify the type of dwelling:

Single Home Duplex Townhouse Condo Apartment Mobile Home

How long have you lived at this address? _____

Do you have any future plans of moving? _____

If you move, what are your plans for this dog if you adopt? _____

Fence Information:

Do you have a fenced in yard? Yes _____ No _____

If yes, please specify (check that apply):

Under 4ft 4ft 5ft 6ft Chain Link Picket Invisible Privacy Other

If other, please describe: _____

If no fence, how will you handle exercise and toilet duties: _____

If no fence, do you plan to fence in the yard? Yes _____ No _____

If planning to fence in the yard, when do you plan to do so? _____

If planning on installing a fence, please specify (check that apply):

Under 4ft 4ft 5ft 6ft Chain Link Picket Invisible Privacy Other

If other, please describe: _____

Backyard Information:

Do you have a screened in patio? Yes _____ No _____

Do you have a doggie door? Yes _____ No _____

Pool? Yes _____ No _____ If yes: above ground underground Safety fencing: Yes No

Do you live on a lake or canal? Yes _____ No _____

Occupants and Ownership Information:

How many adults are in your household? _____

How many children (under 18) are in your household? _____

Please indicate the ages of all children: _____

Who will be the primary caregiver for this dog(s)? _____

Age of primary caregiver (if under 18): _____

Is everyone in the household aware of and agreeable to your interest in fostering? Yes_____ No_____

Have your children been taught how to appropriately interact with an animal? Yes_____ No_____

Given the Husky traits for escaping & roaming, will you teach all in the household the importance of never taking the dog out without a lead and the importance of making sure all gates & doors are secure? Yes___ No___

Are there regular visitors to your home (human / animal) which your new dog must get along? Yes___ No___

If yes, please describe: _____

FOSTER DOG:

Where will the dog spend the day when everyone's away to work, school, etc.? (check all that apply)

Loose indoors Crate Garage Loose outdoors Other

If other, please describe: _____

Where will the dog spend the night? (check all that apply):

Loose indoors Crate Garage Loose outdoors In bed with owner Other

If other, please describe: _____

How many hours on average will the dog spend alone? _____

3 PERSONAL REFERENCES (no more than one family member):

Name: _____

Relationship: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone#: _____ Best time to call: _____

Email Address: _____

Name: _____

Relationship: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone#: _____ Best time to call: _____

Email Address: _____

Name: _____

Relationship: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone#: _____ Best time to call: _____

Email Address: _____

OTHER INFORMATION:

Do you agree to let a representative of SFSHRI visit your home by appointment? Yes_____ No_____

If No, why not? _____

Please indicate how you heard about our organization: _____

Please let us know any other information you wish us to consider in placing a dog with you: _____

By filling out this volunteer / foster application, I/we the undersigned are aware that even after the vet/reference check and home inspection are complete that I/we may not be approved to be a volunteer or foster home for South Florida Siberian Husky Rescue, Inc.

Signature of Applicant: _____ Date: _____

Print Name: _____

Signature of Co-Applicant: _____ Date: _____

Print Name: _____

Please Mail to:
South Florida Siberian Husky Rescue, Inc.
4846 N. University Drive, #333
Lauderhill, FL 33351