



4155 N. Rancho Drive, #150  
Las Vegas, NV 89130  
(702) 629-6351

## FOSTER PARENT APPLICATION/HOME VISIT

### PERSONAL PROFILE:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

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

Housing status:  Own  Rent Renters, are you allowed to house animals?  YES  NO

Landlord's name and phone #: \_\_\_\_\_

Number of people in household: \_\_\_\_\_ Ages of children: \_\_\_\_\_

Names and phone numbers of two personal references:

1.

2.

**Please list all pets that are currently part of your household:**

Dog/Cat

Breed

Gender/Age

Vaccinated

Spayed/Neutered

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

List any medical or behavioral issues any of your pets may have:

\_\_\_\_\_

\_\_\_\_\_

**Why do you want to be a foster parent?**

\_\_\_\_\_

\_\_\_\_\_

**What is your experience with cats? (Previous foster experience, previous cat experience, etc)**

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**What organizations did you foster for? Please list Name and Phone Number:**

1. \_\_\_\_\_
2. \_\_\_\_\_

**Can we contact them for a reference? [ ] YES [ ] NO**

**What is your work schedule/how long will the foster animals be left alone?**

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**Are you willing and able to transport animals to and from check-ins and adoption appointments/events?**

[ ] YES [ ] NO

**PROPERTY INFORMATION:**

**Describe the area the foster animals will stay: \_\_\_\_\_**

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**Do you have a doggie door? [ ] Yes [ ] No**

If yes, is it left open all the time?: \_\_\_\_\_

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**FOSTER COMMITMENT:**

**Which type of cats are you interested in fostering? Please check all that apply:**

- [ ] Weaned kittens (4-8 weeks)
- [ ] Kittens needing medical care ( ringworm/URI)
- [ ] Unsocialized kittens
- [ ] Cats needing medical care
- [ ] Cats needing socializing (shy)

Page 3 Name: \_\_\_\_\_

**How long will the cat/kitten be alone on a regular basis?** \_\_\_\_\_

**Do you have a way to confine the cat(s)?** \_\_\_\_\_

**Fostering is a full time commitment! How long are you willing to foster any cat/kitten?** \_\_\_\_\_

**How many animals are you willing to foster at one time?** \_\_\_\_\_

I certify that the above information is true and correct. I understand that any falsification of the above information may be grounds for denial of this application or termination of my volunteer status. I authorize PALNV staff to conduct an on-site inspection of my home and the area where the animals will be kept. I understand that I may refuse any specific request to foster due to timing or other reasons.

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Applicant Signature

Date