



EL PASO PUG RESCUE FOSTER APPLICATION

To help ensure the health and safety of our rescued pugs, please answer each of the following questions as thoroughly as possible. Incomplete applications will not be considered. Please remit to info@elpasopugrescue.org.

Provide your FULL Legal Name:

First Middle Last

Please list any prior last names: _____

Date of Birth - EPPR requires fosters to be 21+ _____
MM / DD / YYYY

Spouse/Partner's Name:

First Middle Last

Please list any prior last names: _____

Spouse/Partner's Date of Birth _____
MM / DD / YYYY

Primary Phone Number:

Secondary Phone Number

Address:

Street Address _____

Address Line 2 _____

City _____

State _____

Zip Code _____

How long have you been at this address? _____



What type of dwelling do you live in?

House / Condo / Duplex / Apartment / Mobile Home or Trailer

Do you rent or own? Rent / Own

May we contact your property owner? Yes / No / I own my home

Name of Property/Apartment Complex: _____

Property Manager's Name: _____

Property Manager's Phone Number: _____

Leasing Office:

Street Address _____

Address Line 2 _____

City _____

State _____

Zip Code _____

Number of residents living in your home: _____

Ages of all residents live in your home: _____

Please list full names for anyone over 18 living in your home: (Include DOB)

What is your Occupation? _____

Your place of Employment: _____

Length of time with Employer: _____

Address of Employer:

Street Address _____

Address Line 2 _____



City _____

State _____

Zip Code _____

Why do you want to foster Pugs? _____

How many foster dogs are you willing to take in at one time? _____

I am interested in (Circle all that apply): Male / Female

Pug Mix / Special Needs Pug / Black Pug / Fawn Pug

Age 0-2 / Age 2-4 / Age 4-6 / Age 6 or older / Senior Pug

Do you have a fully fenced yard? Yes / No

Do you currently own any dogs? Yes / No

Do you currently own any cats? Yes / No

What brand of dog food do you feed your dog(s)? _____

Do you have a pool? Yes / No

Do you have a doggy door? Yes / No

Where will the Pug spend most of the day? Indoors / Outdoors

Where will the Pug sleep? Indoors / Outdoors

How many hours per day will the Pug spend alone? _____

Are you or your spouse a member of the military? Yes / No

Do you live in military housing? Yes / No

Have you ever sold or given away a pet? Yes / No



Have you ever surrendered a pet to a shelter, humane society, or rescue? Yes /No

If yes, please explain: _____

Have you ever volunteered or fostered for another rescue group? Yes / No

List pets you CURRENTLY own (Include – Name, Type/Breed, Sex, Age):

Are your dog(s) and/or cat(s) spayed/neutered? Yes / No

Are your pet(s) current on all vaccinations? Yes / No / N/A, no pets

List PAST pets you have owned in the last 5 years (Include – Name, Type/Breed):

List all veterinarians your pets have seen in the past 5 years (Include – Names of Clinics and Phone Numbers):

How did you hear about us? _____

We require 3 personal references. Please, limit to 1 family member at most.

Reference #1

First Middle Last

Phone Number for Reference #1: _____

Relationship to Reference #1: _____



Reference #2

First Middle Last

Phone Number for Reference #2: _____

Relationship to Reference #2: _____

Reference #3

First Middle Last

Phone Number for Reference #3: _____

Relationship to Reference #3: _____

**We require a criminal background check before we can place a Pug in your home.
Will you allow us to conduct a criminal background check? Yes / No**

If you've ever been convicted of a crime please explain here:

I agree that I have answered all questions honestly and to the best of my ability. I understand that the discovery of any intentional misinformation will lead to the immediate dismissal of my application.

Name (printed)

Signature

Date