



Starfleet Service Dogs, Inc. Foster Application

Dear Foster Applicant,

Our mission at Starfleet Service Dogs, Inc. (SSDI) is to professionally task-train, match, and sustain service dogs to mitigate an individual's mental or physical disability. SSDI envisions an integrated community of humans and animals helping each other to live fulfilled lives. The first step in the process to training rescue dogs to become service dogs is showing them the love and compassion they deserve. We do not own a facility that houses dogs; therefore, we rely on community support so that our dogs are never placed into a kennel situation. One of SSDI's core principles is teamwork as it takes a large group of caring individuals to train and maintain these dogs. Working together and continued training are what keep our dogs going strong.

This application is voluntary and any information you provide is used for the sole purpose of evaluating your suitability to foster one of our service dogs in training. If you need accommodations in order to successfully fill out the attached documents please contact us. In order to help us help you, please provide honest and complete information. Starfleet Service Dogs, Inc. is a 501(c)(3) non-profit, and we thank you for your interest.

*Jennifer Barnhard, President/Founder
Starfleet Service Dogs, Inc.*

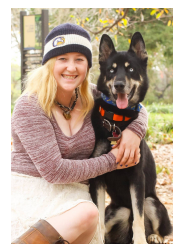
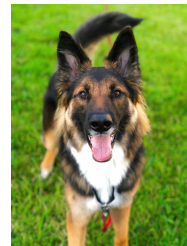
Any Questions or Concerns please call/text

301-509-6742

Where to Send a Completed Application

ATTN: ADMISSIONS DIRECTOR

info@starfleetservicedogs.org



Applicant Information

Full Name: _____

Date of birth: _____

Sex: _____

Street address: _____

City: _____

State, province, or region: _____

ZIP or postal code: _____

Country: _____

Cell phone: _____

E-mail address: _____

Day In the Life: Describe the Environments

Activity Level:

Modes of Transportation: _____

School: _____

Work: _____

Hobbies: _____

Where would you not take your service dog in training?:

Life with a Service Dog in Training

Can you commit to the following for care of the foster dog; if you have financial concerns please list.

Recommended Food & Water?: _____

Crate & Clean Sleeping Area?: _____

Treating the dog as a working dog and NOT a pet?: _____

NOT allowing strangers to pet the dog without permission?: _____

Does anyone in your household have concerns about living with a service dog in training?

Home Life

What type of housing do you live in?: (house, condo, townhouse, etc.)

How long have you lived in this housing situation?: _____

Who owns your property (first and last name)?: _____

Phone number of the owner: _____

Signature of owner stating you, _____, have permission to have a service dog in training at your residence:

Signature of Owner: _____

Date: _____

Who lives in the residence (names, age, and relationship to you):

If you or your roommates have another dog(s) please provide us with the following information: (Please also attach a picture of the dog(s)):

Dog 1:

Name: _____

Breed: _____

Age: _____

Sex: _____

Weight: _____

Microchip Number: _____
 Rabies Number: _____
 License Number: _____
 Spayed/Neuter Date?: _____
 Vaccination Records: _____
 Date of Last Comprehensive Exam: _____

Dog 2:

Name: _____
 Breed: _____
 Age: _____
 Sex: _____
 Weight: _____
 Microchip Number: _____
 Rabies Number: _____
 License Number: _____
 Spayed/Neuter Date?: _____
 Vaccination Records: _____
 Date of Last Comprehensive Exam: _____

Dog 3:

Name: _____
 Breed: _____
 Age: _____
 Sex: _____
 Weight: _____
 Microchip Number: _____
 Rabies Number: _____
 License Number: _____
 Spayed/Neuter Date?: _____
 Vaccination Records: _____
 Date of Last Comprehensive Exam: _____

Are there any other pets that the dog would come in contact to?(If so, list):

Where will the dog exercise?:

Is anyone in the household allergic to dogs?:

Does anyone in the household smoke or use drugs?:

Are large get togethers ever hosted at your residence where the dog would be exposed to many new people at one time?:

Animal History

Have you ever owned a dog before?: (If so, include what breed and at what age you got them)

Have you ever trained a dog before?: (If so, include what breed and at what age you got them) _____

Have you ever fostered a service animal in training before?: _____

If yes, when and where and for what organization (if any)?:

Personal History

What type of housing do you live in?: (house, condo, townhouse, etc.)

How long have you lived in this housing situation?: _____

Are you an active member of the military or a veteran?:

Have you or anyone you know been investigated for animal cruelty or neglect?:
(explain) _____

Have you ever had an alcohol or substance abuse problem?:

Have you ever been convicted of a felony?: _____

By signing below I hereby declare that the information provided above is true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that my application may be denied.

Signature: _____ Date: _____

Personal Recommendations

A Family Member

Name: _____

Address: _____

Phone: _____

Email: _____

A Friend/ Or Non-Relative that knows you fairly well

Name: _____

Address: _____

Phone: _____

Email: _____

