

FOSTER CARE APPLICATION

We appreciate the invaluable service that foster families provide. We want to make the most informed decision regarding which animals to place in your care. Completing this application is the best way to assure a positive experience for both you and the animals.

Name: _____

Address: _____

Daytime Phone: _____ Cell phone: _____

E-mail: _____

Type(s) of animals you are interested in fostering (dogs/cats/puppies/kittens/other)

Dogs Puppies Cats Kittens Other

Have you fostered animals before? Yes No

If yes, where _____

If no, what experience have you had with animals that would be helpful?

Do you have any experience training or working with dogs with behavioral issues?

Yes No

If yes, please describe _____

What type of residence do you live in? Do you own or rent ?

House Trailer Other

Apartment Condo

Do you have a fenced yard? Yes No

If yes, what type and how high? _____

Are there children in your household? Yes No

If yes, what ages? _____

Does any member of your household have allergies? Yes No

What pets have you had in the past? _____

Do you have any pets in your household now? Yes No How many? _____

What type? _____

Are they spayed or neutered? Yes No

Are their vaccinations current? Yes No

Will you agree to provide the foster animals with necessary food, water and shelter? Yes No

Will you keep the foster animal separate from your own animal if necessary?

Yes No

Where do you plan to keep your foster animal? _____

What will you do to find your foster animal if it becomes lost? _____

Will you consent to periodic home inspections? Yes No

(This is to ensure animals are properly taken care of and in a safe environment)

How did you hear about the foster program? _____

Can you accept that some animals will not survive or may have to be euthanized and that this decision is up to the Tulsa Animal Shelter staff? Yes No

I have answered the questions above truthfully and completely. I understand that although City of Tulsa Animal Welfare takes reasonable care to screen animals for foster care placement, it makes no guarantee relating to the animals' health, behavior or actions. I understand that I receive foster care animals at my own risk and can reject or return any animals for which the COTAW has asked me to provide care. I indemnify and hold the COTAW and the City of Tulsa free and harmless from all liability arising out of any and all claims, demands, losses, damages, action, judgment of every kind and description which may occur to or be suffered by me, members of my household or any third party by reason of activities arising out of this agreement.

Date _____ Signature _____

Tulsa Animal Welfare
CONFIDENTIALITY AGREEMENT

If accepted as an Animal Welfare volunteer, I understand I may come in contact with confidential information. Therefore, I shall treat all information I receive from fellow citizens, staff, reports, or law enforcement officers as confidential. I understand that I could jeopardize the ultimate investigation of a crime by revealing information. I will not discuss any aspect of a crime or investigation with any person unless directed to do so by my supervisor. I do hereby agree to protect this information to the best of my ability and to not divulge it during or after my service as a volunteer. I also agree that I will not use my association with Tulsa Animal Welfare to seek favors for others or myself.

Print Full Name _____ Witness _____

Signature _____ Signature _____

Date _____ Date _____

LETTER OF UNDERSTANDING AND HOLD HARMLESS AGREEMENT

I understand that I am not an employee of the City of Tulsa. I am not entitled to payment for services rendered, nor am I entitled to compensation or fringe benefits. I further acknowledge that I am a volunteer for purposes of the Fair Labor Standards Act. I wish to volunteer my services to the City of Tulsa Animal Welfare and/or observe members of the Working in Neighborhoods Department perform their duties. I understand that my status as a Tulsa Animal Welfare volunteer may be revoked at any time. In consideration of the above granted authority to observe and other good and valuable consideration, I, my assigned heirs, executors, or agents hereby agree to hold the City of Tulsa and the Animal Welfare Division harmless. I agree to hold harmless and to indemnify the City of Tulsa, the Working in Neighborhoods Dept., and their agents and employees from any and all claims, damages, losses, and expenses including but not limited to bodily injury, illness or death, or property loss of use arising out of the above described observations, volunteer work, and related activities,

Signature: _____ Date: _____

SUBSCRIBED AND SWORN TO BE ME on this the _____ day of _____, 201__.

_____ My Commission Expires: _____
Notary Public

Tulsa Animal Welfare

RELEASE AND WAIVER OF LIABILITY

THIS IS AN IMPORTANT DOCUMENT. PLEASE READ IT CAREFULLY.

I hereby declare and state that I desire a volunteer assignment at City of Tulsa Animal Welfare. Further, I hereby freely and of my own free will and volition execute this document releasing the City of Tulsa and any of its employees from any and all liability, claims, suits, demands, or causes of action which may arise out of or be brought against the Animal Welfare Division or its employees by virtue of any of my volunteer service with the City of Tulsa.

I, hereby agree to accept a position as a volunteer for City of Tulsa Animal Welfare Division. In doing so, I agree to comply with all of the rules, regulations, policies, and procedures of City of Tulsa, Animal Welfare Division. I understand that failure to do so may result in immediate termination as a volunteer. I acknowledge that my services are provided strictly on a volunteer basis, without pay or compensation of any kind.

I further understand and acknowledge that the animal shelter will contain animals of various species, breeds, ages, socialization status, personalities and temperaments, and that some animals may be dangerous, unpredictable, vicious, or ill with diseases that are transmittable to humans or to other animals, including my own pets, through direct contact or by contamination of shoes, clothing, hands, or through other means. I further understand and acknowledge that the animal shelter may possess noxious odors and animal waste, and may pose health and/or safety hazards.

I recognize that in the performance of volunteer tasks there exists a risk of injury including, but not limited to, physical harm caused by animals. On behalf of myself, my heirs, personal representatives and executors, I hereby release, discharge, and agree to indemnify and hold harmless, the City of Tulsa and the Department Animal Welfare Division, its' agents, servants, and employees from any and all claims, causes of action, or demands, of any nature or cause, including all claims arising out of the negligence of City of Tulsa and any persons for whose actions the City of Tulsa may be held liable, and including attorney fees incurred or sustained by me in any way connected with my services for City of Tulsa Animal Welfare Division, including but not limited to animal bites, accidents or injuries.

Volunteer Signature

Date

Print Full Name (Last - First - Middle)

Address (Street - City - State - Zip)

Birth date

Parent/Guardian Signature (if under 18)

Date

Print Parent/Guardian Full Name (Last - First - Middle)

Address (Street - City - State - Zip)

The City of Tulsa has a contract with AmericanChecked, Inc. to perform a background check of our volunteers. The Volunteer Check is a fast, efficient screening created especially for organizations that utilize volunteers and includes:

- Nationwide Criminal Database
- Multi-State Sex & Violent Offenders Search
- SSN Verification
- Address Locator
- Wanted Persons Security Screen

Please sign the letter below indicating your authorization for the Tulsa Animal Welfare Division to conduct a background record check at any time prior to and during your association as a volunteer with Tulsa Animal Welfare Division. This report will be obtained for volunteer purposes only.

Sincerely,
Jean Letcher, Manager
Tulsa Animal Welfare

BACKGROUND RECORD CHECK AUTHORIZATION

As part of the application process, it is necessary for the Tulsa Animal Welfare Division to conduct a thorough background investigation. This background will be used to help determine my suitability and fitness for service as a volunteer, whether paid or unpaid and predictability for my success in the job. I agree that documents and records of information gathered as part of the background investigation concerning me shall remain confidential but that I may request a copy of any information that results in an adverse decision regarding my volunteer association with Tulsa Animal Welfare Division. I understand that I make this agreement as a condition of further consideration for volunteer service and agree that it should be binding upon me whether I continue in my current capacity or whether my application is rejected. I understand the authority for collection of information must be signed by me, giving Tulsa Animal Welfare Division and/ or their agent permission to conduct a thorough background investigation. This voluntary release allows Tulsa Animal Welfare Division and/or their agent to contact agencies for release of information and accurate documentation concerning my past personal history, past employment history, financial, medical and including a criminal history check.

AGREEMENT

I certify that all answers and information submitted by me are true and complete to the best of my knowledge.

I authorize you to make such investigation and inquiries of my personal, employment, educational, military, financial, medical, criminal histories and other related matters as may be necessary in arriving at a decision. I hereby release employers, schools, and other persons from liability in responding to inquires in connection with my application.

In the event that my application as a volunteer is accepted, I understand that false or misleading information given in my application or interview(s) may result in discharge. **Notice: A photocopy or fax of this release may be accepted as an original.**

Applicant Signature Date Social Security Number

Print Full Name (Last - First - Middle) Residence Address (Street - City - State - Zip)

Other Names Used: Mailing Address (If Different)

Birth date Birthplace (City, State, Country) Driver License Number/State