



PETS ARE WORTH SAVING (PAWS)

Foster Evaluation of Foster Dog

First we'd like to thank you for opening your heart and home to foster this dog in need. In order to make the best match for your foster dog, we ask that you fill out this form after you have had the dog for at least a week. We want to allow the foster dog to become comfortable and get a true evaluation of his or her temperament in order for us to place them in a loving and forever home.

We appreciate your evaluation. If there is anything else you would like to share after you have done the evaluations, please share that info too.

Dogs name _____ Breed _____ Male/Female _____ Age _____ Weight _____

Dogs Coloring _____ Any distinguishing Markings _____

Is your foster dog being treated for any health problems? _____

Please list any medications your foster dog is now taking and how often _____

What brand of food does your foster dog eat? _____

How much per day? _____

Treats? _____

Is your foster dog good with children? _____

Yes: good with children of all ages Yes, best with children over 6 Yes, best with children over 12

Is your foster dog good with all people? Yes No Unknown

Comments/Details _____

Is your foster dog good with other dogs? Yes No Unknown

Comments/Details (male, female, big, small, etc.) _____

Is your foster dog good with cats? Yes No Unknown

Comments/Details (male, female, etc.) _____

Is your foster dog house broken? Yes No

Comments _____

Is your foster dog crate trained? Yes No Unknown

Comments _____

Is your foster dog allowed on the furniture? Yes No

Comments _____

What are your foster dogs best qualities? _____

Does your foster dog know any commands or tricks? Yes No

Comments _____

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Does your foster dog have any favorite toys or games? Yes No

Comments _____

Does your foster dog have any bad habits? _____

Does your foster dog have any aggressions? (Food, toys, people protective, etc.)

Yes/No Comments _____

Has your foster dog bitten anyone? Yes No If yes please explain _____

Does your foster dog have any known fears? (Thunder , loud noises, etc.) Yes No Unknown

Comments _____

Does your foster dog have separation anxiety? Yes No Unknown

If so, please describe the signs it exhibits _____

Does your foster dog walk well on a leash? Yes No Comments _____

Is your foster dog prone to bolt out doors/gates? Yes No Comments _____

Please describe if and how long the dog is typically left alone and where do they spend their time when they are alone (free in the house, crated, outside free in yard, outside kennel)

Comments _____

Where does your foster dog sleep? (A dog bed , your bed , etc.) Where do they spend the night?

(Indoors free , indoors crated , outside in yard , outside kennel) Comments _____

What your foster dog's energy level? High Low Medium

Comments _____

Does your foster dog have a regular exercise routine such as daily walks? Yes No

Comments _____

Please describe the perfect forever home and family for your foster dog

Date _____

Name of Evaluator(s) _____

Thank you for taking the time to fill out this questionnaire. It will be used to answer questions of possible adopters and to help us place your foster dog in the best home possible to fit his or her needs. (081316).