



Service Dog Sitter Application

Basic Information

Name:

Date:

Address:

Apt.:

City:

State:

Zip:

Phone:

Email:

Are you 21 or older?

Are you interested in dog sitting a young adult dog or a puppy?

Yes

Young adult dog

No

Puppy

*Dog sitting can be anywhere from a weekend to a few weeks if our foster homes or service dog recipients are in need of help.

*Please note: PGI will contact your veterinarian and complete a home visit before you are certified to dog sit.

Home Information

Do you own or rent your home, condo, or apartment?

Own

Rent

Do all your family members want to sit a dog?

Yes

No

Do you have any animals in your home?

Yes

No

If Yes, please list:

Cats:

Dogs:

Other:

Are all your animals up to date on shots?

Yes

No

Are all your animals spayed/neutered?

Yes

No

What is the name and phone number of your veterinarian clinic?

May we contact your veterinarian clinic?

Yes

No

Have you ever been convicted of animal cruelty or neglect?

Yes

No

Animal Information/Experience

How many hours per day would the dog be left alone?

How long are you able to keep a dog sitting dog for?

Please describe any experience you have taking care of a dog.

Please describe any dog training experience you have. Note: you do not need to have any experience to be considered as a dog sitter.

Are you a Bradley student interested in volunteering for Wags for Mags?

Yes

No

How did you hear about our organization?

Personal Reference

Name:

Relationship:

Address:

Apt.

City:

State:

Zip

Phone:

Service Dog Sitter Application Waiver

In my participation with Paws Giving Independence, I do hereby agree to hold free from any and all liability Paws Giving Independence and its members and officers. My family, members of my household, and myself wave the rights and claims for damages and injuries which may come from my connection and participation with PGI.

I declare myself to be physically sound to participate with the PGI organization.

I understand that the dogs/puppies in my foster care are property of Paws Giving Independence. Any activity with these dogs/puppies must be cleared through Paws Giving Independence's directors. The only exception is in emergency care situations. If emergency care is required, PGI must be informed within 24 hours.

I have read and understand the terms, conditions, policies, and procedures of the Paws Giving Independence foster care program. I understand PGI can remove a foster dog from my home at any time due to failure to fulfill these terms, conditions, policies, and procedures of Paws Giving Independence.

Name:

Signature:

Date:

Please email completed form to mkosner@givingindependence.org for PGI applications and wagsvolunteercoordinator@gmail.com for Wags for Mags applications. This page must be printed, signed, and returned for the application to be complete. You can hand the waiver page in to a board member, scan and email it, or mail it to the PGI PO Box.

Paws Giving Independence
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