

KINDRED SOULS FOUNDATION

Senior Companion Program Process

The intent of this program is to find appropriate placements for senior animal companions and to provide both human and animal companions with a mutually joyful experience. Kindred Souls Foundation (KSF) provides the caregiver with the necessary food, litter, and medical services for their furry friend and promises the animal companion a loving, healthy and safe environment. KSF remains a support to the animal for the remainder of his/her lifetime while the caregiver provides for him/her in their home.

There is no adoption fee since the companion remains a Kindred Souls Foundation animal while the senior person cares for him/her! Should the caregiver no longer be able to tend to the animal, KSF takes the animal back into the Foundation. The program is designed around Kindred Souls Foundation's responsibility to ensure the animals are provided with the care they need to maintain quality of life. Caregivers are a huge part of the success.

Requirements to Participate in the Senior Companion Program

- Caregiver must be 62+ years / animal companions are usually 8+ years
- Non-smoking homes only
- Cats must remain in-door only; dogs must not be left unattended outdoors or left outdoors overnight
- Permission from Landlord or Manager to have an animal on premises (if applicable)
- Caregiver must disclose any health problems/conditions so that KSF can ensure we find the best 'fit' in a companion
- Caregiver must follow the animal companion care guidelines outlined in the Care Contract

Matching Senior Companions: Each person and animal's needs are assessed and a profile is developed. Our holistic approach to care ensures that all components of their being (medical, physical, emotional, and spiritual) are taken into account when finding the most appropriate match between human and animal companions.

Home Visits: Each caregiver is met at his/her home to discuss potential companions and to meet potential matches. Monthly home visits are made after the animal is placed. Food and/or litter are delivered at this time and the animal's health is discussed.

Medical Needs: When the animal companion is in need of vet care, we arrange for a KSF volunteer to schedule the appointment, transport to and from Chambers Creek Vet (when needed), and to ensure the caregiver is aware and comfortable with the treatment plan.

Animal's Health: All animal companions will receive a Well Pet Exam before being placed in the home. The animal will be current on vaccines (cats: FVRCP, Rabies; dogs: DHPP, Rabies) according to age, altered, de-wormed, flea-free and micro-chipped. Cats will be combo tested for Feline Leukemia and FIV. Some animals may have medical issues, but all information will be disclosed and only those suitable matches will be made. Not all senior animals have presenting medical issues!

Completed and hand-signed Senior Companion Program Applications are mailed to:

Kindred Souls Foundation
ATTN: Senior Companion Program
P.O. Box 88627
Steilacoom, WA 98388

Senior Companion Program is currently limited to cities within a 20-minute radius of Lakewood, WA

KINDRED SOULS FOUNDATION
 Senior Companion Program
 Animal Companion Care Application

Applicant Name(s) 1. 2.	Home Phone Alternate Phone	Date:
Physical Address (include city/zip)	Email Address	

1. Do you have a guardian who will need to authorize your Animal Companion Care Application & Contract? Yes No

Guardian's Name _____ Phone Number _____

2. Type of Dwelling House Apartment Condo Other _____

Apartment/Facility Name _____

3. Do you Own Rent Live with friends/relatives

Landlord's Name _____ Phone Number _____

4. How long have you lived at your current address? _____

5. Are there any pet restrictions in your place of residence? No Yes

If Yes, please specify _____

6. How many people live in the home? _____

7. Do you plan on moving in the next 12 months? Yes No

8. Do you have transportation? Yes No

If Yes, please specify _____

9. Do you have other animals in the home? Yes No

If Yes, please specify _____

10. Are any members of the household allergic to animals? Yes No Unknown

If Yes, then how will this be accommodated? _____

11. Please list any of your medical and/or physical conditions for which we should be aware in determining the most appropriate animal companion match for you:

12. Do you use any of the following: cane walker scooter wheelchair

13. Do you wish to care for a cat or a dog? Cat Dog

CATS

Hair length: short medium long any

Claws: de-clawed only (will limit options)

DOGS

Hair length: short medium long any

Activity level: high medium low

Will you walk the dog? Yes No

Weight: 0-20# 21-40# 41-50# 51+#

14. What is the most weight you can lift? _____ lbs.

15. Are you able to bend over to clean up the animal's waste? Yes No

16. Are you able/willing to brush your animal companion? Yes No

17. Are you able/willing to care for an animal who requires wet food? Yes No

18. Are you able/willing to care for an animal with medical needs? Yes No Unsure

19. Are you able/willing to care for an animal who needs oral medication? Yes No Unsure

20. Are you able/willing to care for an animal who needs needle injections? Yes No Unsure

21. How many hours a day will your animal companion spend without a human companion?

22. Where will your animal companion be while you are away from home?

23. Where will your animal companion sleep at night?

24. Do you have a dog door? Yes No If Yes, does it lock? Yes No

25. Do you have a fully fenced backyard? Yes No If Yes, how tall? _____

Please provide two emergency contacts:

Name _____ Phone _____

Name _____ Phone _____

Please tell us about yourself and what you would like in an animal companion: