Service and Assistance Animal Registration & Agreement Form

Deadline(s) for submission of this form to Residence Life: June 1, for Fall Semester and October 1, for Spring Semester.

Please complete this form and submit it to Office of Residence Life before June 1, for the Fall semester and October 1, for the Spring semester. All forms are reviewed by the Special Accommodations Team (SAT). If forms are received after these dates, exception to the deadline can be made by the Office of Accessibility Services (OAS). Each year, please complete a new form if any changes in the information about your Service or Assistance Animal occurs.

Provide the following documentation with this form:

- Verification of Animal Health Records
- Verification of Animal Identification

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<tr>
<th>Student's Name</th>
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<tr>
<td>Student’s Permanent Address</td>
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<tr>
<td>Student’s Home Phone</td>
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<tr>
<td>Student's Residence Hall &amp; Room Number</td>
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<td>Student’s Campus ID</td>
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<tr>
<td>Student’s University email address</td>
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<tr>
<td><strong>Student's Cell Phone</strong></td>
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<td><strong>Service or Assistance Animal's Name</strong></td>
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<td><strong>Type of Animal and Breed Description of the Animal (photo must be attached or included)</strong></td>
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<td><strong>Is the Service or Assistance Animal current on veterinary-recommended vaccinations?</strong></td>
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<td>Circle one: Yes/No If yes, date of most recent vaccinations: If no, explain:</td>
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**Alternate/Emergency Caregiver for Service or Assistance Animal If Student Partner is Unavailable**

**This person cannot be a university resident and must be an off campus contact**

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<th><strong>Name</strong></th>
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<td><strong>Cell Phone Number</strong></td>
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<td><strong>Relationship to Student</strong></td>
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Please attach the Veterinarian’s Verification that the Service or Assistance Animal has all Veterinary recommended vaccinations to maintain the Service or Assistance Animal’s health and prevent contagious disease.

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**Animal Cleanliness**

1. Student Partners and Handlers are responsible for properly containing and disposing of the Service or Assistance Animal’s solid waste (e.g. feces).
2. Service or Assistance Animal food should be kept in a closed container within the Student Partner’s bedroom.
3. If the Service or Assistance Animal vomits, urinates, leaves solid waste, and/or becomes incontinent, it is the responsibility of the Student Partner or Handler to make sure the contaminated area is cleaned up immediately. If the contamination occurs indoors, the Student Partner or Handler should clean-up immediately and contact Facilities for additional disinfection. Any excessive cleaning or disinfection that is rendered other than

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normal cleaning at the end of the school year will result in a damage charge as pursuant to the University C-Book.

4. Bathing or cleaning of a Service or Assistance Animal is expected to avoid significant odors and/or to manage shedding. Student Partners and Handlers may not use human showers/tubs within the University residential community to bath or clean their Service or Assistance Animals.

5. Student Partners and Handlers are responsible for taking effective precautions to avoid flea and tick infestations. If the Service or Assistance Animal is found to have fleas or ticks, the Student Partner will be responsible for reporting the issue to Office of Residence Life, eliminating the fur coat infestation and laundering all pet bedding. Treatment of the Student Partner's living space will be coordinated by Office of Residence Life and all associated costs will be billed to the Student Partner.

6. Permitted areas: Assistance Animals are generally permitted in Caldwell housing only. Assistance animals are not permitted in other Indoor areas of the University aside from housing unless special exception has been made. (C-Book, p. 56)

**Permitted Areas for Service Animals and Assistance Animals**

Service animals are generally permitted throughout campus and Caldwell University facilities, except in certain areas where animals are prohibited for health reasons. A Service Animal can be brought into dining facilities but may be prohibited from food preparation areas or other areas in which animals are prohibited under relevant laws. If there is no reason to believe that the presence of a Service Animal would compromise the environment of a laboratory or Health Center, the Service Animal may also be prohibited from those areas. Additionally, if an area may pose a physical danger to the Service Animal, the Service Animal may be prohibited from entering that area.

Assistance Animals are generally permitted in Caldwell housing only. Assistance Animals are not permitted in other areas of the University aside from housing unless special exception has been made.

**Student Partner Responsibilities**

1. The Student Partner must provide the Office of Residence Life with a completed "Service or Assistance Animal Registration Form" and the Veterinarian's Verification that the animal has all veterinary-recommended vaccinations to maintain the animal's health and prevent contagious disease.

2. The Student Partner is financially responsible for the actions of the Service or Assistance Animal including bodily injury or property damage, beyond ordinary wear and tear, including, but not limited to, any replacement of furniture, flooring, drapes, or wall covering. The Student Partner is expected to reimburse these costs upon repair and/or move-out. If a repair is made prior to move-out, charges will be posted to the Partner's account for payment.

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3. The Student Partner is responsible, as are all students, for any expenses that are required due to costs incurred for cleaning or repair which is not considered ordinary wear and tear.

4. To be a roommate/apartment mate/suitemate of the Student Partner, the student roommate/apartment mate/suitemate must sign an agreement to demonstrate their willingness to live in the same room/apartment/suite with the Service or Assistance Animal.

5. The Student Partner agrees, as all students do, to continue to abide by all other Office of Residence Life policies. Having a Service or Assistance Animal does not preclude the Student Partner from following all other guidelines found in The Guide to Community Living and the Student Handbook.

6. Should the Service or Assistance Animal be disqualified or removed from the premises for any reason, the Student Partner is will remain responsible for the terms and conditions of the housing agreement for the remainder of the term of the agreement.

By my signature below, I verify that I have read, understand and will abide by the Guidelines outlined here and as well as the full Service & Assistance Animal policy as pursuant to the University C-Book.

Resident Student Partner Signature ____________________________ Date ____________

Director of Residence Life or Designee ____________________________ Date ____________

Roommate/Apartment mate/Suitemate Agreement

By my signature below, I agree to share the common areas of my assigned residential space with the Service or Assistance Animal approved by this agreement. Should I have any concerns regarding the care and control of the approved Service or Assistance Animal, I will discuss my concerns with the Service Animal’s Student Partner and then with Office of Residence Life staff, if the Student Partner of the Service or Assistance Animal and I cannot come to an agreement. I am aware that the Service or Assistance Animal is working with its Student Partner, and I will observe the following etiquette:

- I will avoid touching the Service or Assistance Animal or its partner without permission.
- I will not make noises at the Service or Assistance Animal as it may distract the Animal from doing its job.
- I will not feed the Service or Assistance Animal without the approval of the Student Partner as it may disrupt its schedule.
- I will not attempt to startle the Service or Assistance Animal.
- I will not attempt to separate the Service or Assistance Animal from its Student Partner or Handler.

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Handler Agreement

By my signature below, I agree to provide personal attendant support for the Student Partner of the Service Animal approved by this agreement, and abide by the conditions set forth above AND in the full service Assistance Animal policy as pursuant to the University C-Book, which can be found on the Caldwell University website. Should I have any concerns regarding the care and control of the Service Animal, I will discuss my concerns with the Service Animal’s Student Partner and then with Office of Residence Life, if the Student Partner of the Service Animal and I cannot come to an agreement.

- I will avoid touching the Service or Assistance Animal or its partner without permission.
- I will not make noises at the Service or Assistance Animal as it may distract the Animal from doing its job.
- I will not feed the Service or Assistance Animal without the approval of the Student Partner as it may disrupt its schedule.
- I will not attempt to startle the Service or Assistance Animal.
- I will not attempt to separate the Service or Assistance Animal from its Student Partner or Handler.

1. ___________________________________  ___________________________  __________
   Handler Name                        Handler Signature               Date

2. ___________________________________  ___________________________  __________
   Handler Name                        Handler Signature               Date

3. ___________________________________  ___________________________  __________
   Handler Name                        Handler Signature               Date

4. ___________________________________  ___________________________

July 2019
<table>
<thead>
<tr>
<th>Handler Name</th>
<th>Handler Signature</th>
<th>Date</th>
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<tr>
<td>Handler Name</td>
<td>Handler Signature</td>
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<tr>
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</table>

Resident Student Partner Signature

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**Veterinarian Verification Form**

**To be completed by a licensed veterinarian and accompanied by a script**

Please attach the Veterinarian's Verification that the Service or Assistance Animal has all Veterinary recommended vaccinations to maintain the Service or Assistance Animal's health and prevent contagious disease.

**Please complete the following information:**

Veterinarian's Name and/or Clinic Name

Address

City State Zip

Phone Number

Fax Number

**Service or Assistance Animal Information:**

Owner's Name:

Service or Assistance Animal's Name, Animal Type and Breed:

July 2019
Sex Spayed/Neutered

Has the Service or Assistance Animal ever bitten or shown aggression toward people?

☐ I verify the above mentioned Service or Assistance Animal has all current vaccinations as required.
☐ I verify to the best of my knowledge, the animal is appropriate to live in communal living in University Housing.
☐ I verify that all the above vaccinations will remain current through one year.
☐ I verify that the above mentioned animal has been given a stool sample test for internal parasites.
☐ I verify that the above animal is in general good health.

Veterinarian Signature ____________________________ Date ____________________________
Veterinarian License # ____________________________

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