

**STUDENT EMOTIONAL SUPPORT ANIMAL REQUEST FORM**  
**(TO BE ACCOMPANIED BY REASONABLE ACCOMMODATION DOCUMENTATION)**

**Approval Process**

Before the approval process can begin, each of the following steps must be completed:

**Step 1:** Complete the Emotional Assistance/Support Animal Request Form (located on pages 12-13 of this document)

**Step 2:** Submit (please email-preferred- all or drop off copies to the office) the following required documentation to the Office of Student Access and Disability Services (OSA):

- **Emotional Support Animal Request Form**
- **Completed Reasonable Accommodation Request form for Emotional Support Animal:**
  - Providers should submit the Reasonable Accommodation Verification Form that is linked on the website.
  - If they do not want to submit this form please make sure **ALL** necessary information on that form is submitted in their chosen documentation form.
- **Copy of the City of Kirksville Animal Registration (Animal license issued by City of Kirksville). May email.**
- **Copy of Veterinary Records for animal, including pet health history and vaccinations and/or free of communicable disease. (this documentation should show that ESA has been spayed or neutered) May email**
- **Photos of animal – clear photos of the front and side of the animal.**

**Step 3:** OSA will review documentation and provide decision to student applicant and Residence Life or request additional information. **\*\*Complete/detailed documentation from student and provider is paramount to the process.**

**Step 4:** If student has received approval from OSA they may THEN bring the animal to campus.

Appeals of the Disability Services Office decision should follow the OSA Appeals Policy (available online at: <http://disabilityservices.truman.edu/files/2016/03/2016-Disability-Services-Appeals-Policy.pdf>).

**This policy is not applicable to University buildings beyond the University owned and operated apartments and residence halls. Emotional assistance/support animals are not generally allowed in classrooms or other university buildings (non-residence buildings) under housing accommodations/FHA.**

Conflicts over the use of emotional assistance animals. The use of emotional assistance animals may negatively affect others with allergies, respiratory impairments and other relevant disabling conditions. Conflict resolution will be managed by OSA, Residence Life, and the Vice President for Student Affairs. Evidence of disability and its impact may be required of those negatively affected by the use of the animals by these offices if such a situation arises.

**An animal on campus is considered a PET until formal approval for Emotional Support Animal is verified and APPROVED by the Office for Student Access and Disability Services.**

**PLEASE ENSURE THE REASONABLE ACCOMMODATION FORM SIGNED BY YOU AND FILLED OUT BY YOUR ESTABLISHED AND ONGOING TREATMENT PROVIDER IS SUBMITTED, ALONG WITH THIS FORM AND SUPPORTING DOCUMENTATION REQUIRED. EMAIL SUBMISSION OF ALL IS PREFERRED.**

# \*Emotional Support Animal Request Form

Student Name	
Student Banner ID #	
Permanent Address	
On-Campus Address- <u>Specify Dorm &amp; room #</u>	
Phone #	
Truman Email	
Type of Animal (*Be Specific)	
Name of Animal	
Animal Size/Weight	
Age of Animal at time of request	
Who <u>(OFF CAMPUS)</u> can care for the animal if you are unavailable?	1.Name: _____ Address: _____ Phone: ( _____ ) _____  2. Name: _____ Address: _____ Phone: ( _____ ) _____
<u>LOCAL</u> veterinarian: Even if your ESA regularly sees a vet in your hometown, we need this information on file in case of emergencies or if the animal has to be boarded, should the student and emergency contacts be unavailable.	1.Name: _____ Address: _____ Phone: ( _____ ) _____
City of Kirksville Registration/ License **Please remember, normally, these have to be renewed before returning to campus in January of the each new year.	*Please email a copy of license paperwork issued by City of Kirksville to <a href="mailto:jsneddon@truman.edu">jsneddon@truman.edu</a>
Rabies tag # (For applicable animals)	*Please email of proof of vaccinations and spay/neuter to <a href="mailto:jsneddon@truman.edu">jsneddon@truman.edu</a>
Photo	Please email a front view and a side-view of the animal you are requesting to have an as ESA to <a href="mailto:jsneddon@truman.edu">jsneddon@truman.edu</a>

**As the owner of an emotional assistance animal, I agree to the following statements (initial each):**

- \_\_\_ I understand that I am liable and responsible for my animal's behavior and activities while on campus, including property damage and bodily injury.
- \_\_\_ I must clean up after the animal, including the sanitary disposal of animal wastes. All waste and waste related materials (litter, etc.) will be disposed of at an outside trash receptacle. Outside waste on campus grounds will be disposed of in the proper outdoor receptacle.
- \_\_\_ I understand my animal cannot constitute a direct threat to the health and safety of others.
- \_\_\_ Must reasonably, safely and comfortably fit in a regular size dorm room space and not be detrimental to the animal requested. (For example large breeds may not thrive in a dorm room with a roommate, please consider the ESA and the living space.)
- \_\_\_ I will ensure that my ESA is licensed in accordance with the City of Kirksville and the State of Missouri and wear all appropriate tags.
- \_\_\_ I understand my animal cannot be left unattended in the residential facility overnight without the owner being present. If I leave the housing facility for a night, weekend, etc., I must take the animal with me.
- \_\_\_ I have provided a health certificate signed by a licensed veterinarian indicating that my animal is up-to-date on all recommended vaccinations and will provide updated proof of vaccinations with dates as needed.
- \_\_\_ My animal is house broken, well-groomed, odor free, and not infected with external parasites (i.e., ticks, fleas or lice).
- \_\_\_ An individual with a disability may be charged for any damage caused by his or her Emotional Support Animal beyond reasonable wear and tear to the same extent that it charges other individuals for damages beyond reasonable wear and tear. The Owner's living accommodations may also be inspected for fleas, ticks or other pests if necessary as part of the University's standard or routine inspections. If fleas, ticks or other pests are detected through inspection, the residence will be treated using approved fumigation methods by a University-approved pest control service. The Owner will be billed for the expense of any pest treatment beyond standard pest management in the residence halls. The University shall have the right to bill the Owner's account for unmet obligations under this provision.
- \_\_\_ My animal is spayed or neutered.
- \_\_\_ I understand that my animal must be on a leash or in a carrier at all times while on campus and additionally must be consistently under control and will be crated when owner is not in the dorm room.
- \_\_\_ I have discussed the requested ESA with my roommate and/or suitemates.
- \_\_\_ I have read and understand that I must follow all Guidelines and requirements of an animal user/owner as outlined in the Emotional Support/Assistance Animal Policy.

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Student's signature

Date

# **\*Acknowledgement and Release of Information**

## **Consent Form**

By my signature below, I verify that I have read, understand and will abide by the requirements outlined here and I agree to provide the additional information required to complete my Request for a Reasonable Accommodation under the University's Emotional Support Animal Guidelines for University Housing.

I have read and understand the Emotional Support Animal Guidelines and Agreement and I agree to abide by the requirements applicable to Emotional Support Animals. I understand that if I fail to meet the requirements set forth in the Guidelines, Truman State University has the right to remove the Emotional Support Animal and I will be, nonetheless, required to fulfill my housing, academic and all other obligations for the remainder of the housing contract.

I furthermore give permission to the OSA to disclose to others impacted by the presence of my Emotional Support Animal (e.g. Residence Life staff, residence life students that may be impacted) that I will be living with an animal as an accommodation. I understand that this information will be shared with the intent of preparing for the presence of the Emotional Support Animal and/or resolving any potential issues associated with the presence of the Emotional Support Animal.

I further recognize that the presence of the Emotional Support Animal may be noticed by others visiting or residing in University housing and agree that staff may acknowledge the presence of the animal and explain that under certain circumstances Emotional Support Animals are permitted for persons with disabilities.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\*Please turn in with your application.