

Assistance Animals Only:

4. My animal is an Assistance Animal YES NO
5. Indicate the symptoms of your disability, the assistance that your animal provides to mitigate those symptoms and why the animal is necessary for you to use and enjoy your residence:

Both Service and Assistance Animals:

6. Date you wish to bring your Service or Assistance Animal to campus: _____
7. Do you already live in Student/Post-Doc Housing? Yes No
- a. If yes, please provide location/address/apartment number: _____
- b. If no, please indicate your move-in date: _____
8. Please indicate whether you currently live or will live with roommates or suitemates in Student/Post-Doc Housing? Yes No
9. Do you already own the animal? Yes No
- If No, indicate date when you will obtain animal: _____

10. Type of Animal:

- a. dog
- b. miniature horse
- c. cat
- d. rabbit
- e. Other: _____

11. Breed of animal (if applicable): _____

12. Weight of animal (approximate): _____

13. Physical Description of animal (coat color): _____

14. Name of animal: _____

15. Please also insert a photo of the animal below or attach separately.
16. Attach animal health records, including verification that the animal has all veterinary-recommended vaccinations to maintain good health and prevent contagious disease, including current rabies vaccinations for dogs and cats.
17. For Assistance Animals, attach documentation regarding your disability as required by section IV.A.2.b. of the Policy.

Printed Name: _____

Signature: _____

Date: _____