

Attachment A - EGSC Assistive Animal Accommodation Request

*Complete and submit form along with required documentation per the Assistive Animal Policy to
Stephanie Royals sroyals@ega.edu*

Owner Name: _____

Owner is: _____ Student _____ Employee Telephone: _____

Address: _____

Name two alternate caregivers and phone numbers in case of emergency*:

*caregivers should not be residents

Assistive Animal: Age _____ Species: _____ (Dog, cat, bird, etc.)

Breed: _____ Name of animal: _____

Please provide the following information from the veterinarian at initial request, annually and periodically if necessary regarding the assistive animal:

- Vaccination records
- Clean bill of health from current veterinarian provider
- Proof that the animal is free of communicable diseases, fleas, and parasites.

Attach the following information regarding your disability from a professional healthcare or disability related provider with whom you have a current relationship:

- Information indicating that the requester has a physical or mental impairment;
- The impairment substantially limits at least one major life activity or bodily function, and
- Information showing that the individual needs this specific animal is a reasonable accommodation to assist with as a job or task, provide assistance or alleviate a symptom or effect of the disability.

I hereby attest to the truthfulness and accuracy of the above information. I consent to the release of information regarding the assistive animal, including its location, to facilities and emergency personnel when necessary, and to roommates. This consent is limited to information about the animal and does not apply to information about my disability.

Owner _____ (signature) _____ (Date)
_____ (print name)

Internal Use Only by EGSC Counselor

Date Request Received _____

Supporting documentation received ____ yes ____ no

Date Additional Documentation Requested _____; Received _____

Date Reviewed _____

Approve _____ Deny _____

Date of Notification of Decision to Owner and Method: _____