

Service & Assistance Animal Agreement

Monmouth College

Office Use Only:	Received:
<input type="checkbox"/> Service & Assistance Animal Agreement Form	_____
<input type="checkbox"/> Assistance Animal Registration Form	_____
<input type="checkbox"/> Accommodation Request Form	_____
<input type="checkbox"/> Warren County Dog License (if applicable)	_____

Handler's Name: _____ Animal's Name: _____

Hall/Room (if applicable): _____ ID#: _____

1. Description of Animal (Type, breed, color, size, markings, age, etc.):

2. "I have made the following arrangements for my animal during breaks or when I am away from the College for any reason..."

3. In addition to providing the above information, owners must provide the following information to the Director of Disability Services at Monmouth College **ONLY** IF YOU ARE SUBMITTING AN AGREEMENT RELATED TO AN ASSISTANCE ANIMAL.:

- The credentials and contact information of the evaluator(s) identifying the owner's disability;
- A diagnostic statement identifying the disability;
- A description of the diagnostic methodology used;
- Statement on how the animal serves as an accommodation for the verified disability;
- The above described documentation must be provided and reviewed at the start of each academic year with proof the animal is licensed (pursuant to applicable laws) and in good health

4. "I certify the information I have provided is accurate and understand:
- a. I am responsible for cleaning up after my service/assistance animal on all Monmouth College property, as well as any damage caused by the animal.
 - b. My service/assistance animal must be under control at all times.
 - c. If the animal is not under control or acts in a disruptive or dangerous way, the animal may be asked to not return to Monmouth College buildings.
 - d. My service/assistance animal has a valid Warren County dog license. (*Applicable to service/assistance dogs only*).
 - e. I am responsible for all grooming of the animal at all times, including checking for flea and odor control. If necessary, the college may approve pest control services to be utilized and I will be billed for the expense of any necessary pest treatment.
 - f. Roommates will be notified about the animal by the Office of Residence Life. The notification will include the type of animal, size, and what services the animal performs. Roommates may request a room change if they desire to do so.
 - g. I acknowledge that the College reserves the right to place other reasonable conditions or restrictions on the animal depending upon the nature and characteristics of the animal."

Student Signature

Date

Director of the Office of Disability Services

Date

Director of Residence Life

Date