SERVICE ANIMAL REQUEST FORM

Date	School Building	
Name of Assisted Person:		
Assisted person is Staff Student G	Other	
Name of Animal Owner (if different than	above):	
Name of Animal Handler (if different tha	n above):	
Name of Animal: Typ	e of Animal: 🗆 Dog 🗅 Miniature Horse	
If it is not readily apparent that the an answer the following questions:	imal qualifies as a "service animal," please	
Is use of the animal required because of	a disability? - Yes - No	
What work or task has the service animal been trained to perform?		
terms of that Policy. I understand that housebroken, presents a direct and imfundamentally alters the nature of the eliminated by reasonable modifications, my service animal from its property. I agree to be responsible for any damage students, or others caused by the animal harmless the school district from and	district's Animals Policy. I will abide by the service animal is out of control, not amediate threat to others in the school, or service, program, or activity that cannot be the school district may exclude or remove set to school property or injury to personnel, al. I agree to indemnify, defend, and hold against any and all claims, actions, suits, any party arising on account of, or in ge caused by my service animal.	
Owner Signature	Date	
Parent/Guardian Signature	Date	
Assisted Person's Signature	Date	
Handler Signature	Date	

Please attach the following documentation:

Proof of current licensure

Proof of current vaccinations and immunizations from a licensed veterinarian (as required by state and local law)

APPROVAL	
School Official Signature	Date
Title:	

Note: This form is valid until the end of the current school year. It must be renewed prior to the start of each subsequent school year or whenever a different service animal will be used.