

EMOTIONAL SUPPORT ANIMAL REQUEST FORM

3.17.2021

The Delaware College of Art and Design is compliant with the Fair Housing Act and ADA guidelines as they pertain to assistance animals and service animals. This document pertains only to assistance animals, not service animals as defined by the Americans with Disabilities Act. DCAD reserves the right to amend these policies as needed at any time.

DCAD students are not allowed to have pets in any DCAD building. Assistance animals are not pets, and are approved as a reasonable accommodation given that they perform a specific task that alleviates the symptom(s) of a diagnosed mental or physical condition. Assistance animals may only be approved if the student provides:

1. Verification of the student's disability and a description of the nature and severity of the student's disability from a qualified person, including the person's credentials.
2. A description of diagnostic methodology.
3. A description of the student's current functional limitations.
4. A statement on how the animal serves as an accommodation for the documented disability.

Document must be provided prior to April 21st for returning students or July 1st for new students. After this date, the college has limited ability to accommodate requests.

Documentation for approved ESAs must be renewed by April 1st for each academic year.

Once documentation is received and the request for accommodation is approved, the student's roommate(s) will be notified that an animal will be present in their space. Any conflicts stemming from allergies, phobias, or living preferences will be handled on a case by case basis.

The following are rules and regulations pertaining to any approved animals residing on campus.

1. The student is responsible for the well-being of the approved animal. The approved animal must be kept clean, free of flees and other pests, up to date on vaccinations, and waste must be disposed of in exterior trash receptacles. Hair and waste is not to be disposed of via sinks, showers, or toilets.
2. In the event that the approved animal incurs damages beyond normal wear and tear, the student will be held financially responsible. This includes carpet cleaning and pest control for all affected rooms and spaces.
3. The approved animal is prohibited from any space other than the private residence of the owner. This includes friends' rooms, public spaces and lounges, the dining hall, classrooms, and offices. Whenever transporting the approved animal to or from the student's assigned room, the approved animal must be restrained in a carrying cage, or 3 foot leash if the animal is over 25lbs.

4. Approved animals may not be left unattended overnight or placed in the care of another individual for any length of time. Approved animals must be taken with the student when they leave campus.
5. The student must abide by all other rules pertaining to campus housing.

DCAD reserves the right to reverse the approval of the animal in the event that:

1. the animal poses a direct threat to the health or safety of others that cannot be eliminated by another reasonable accommodation;
2. the specific animal would cause substantial physical damage to the property of others that cannot be eliminated by a reasonable accommodation;
3. the animal would pose an undue financial and administrative burden or
4. the animal would fundamentally alter the nature of DCAD's operations

In the event that approval for the animal is revoked, the student has (2) days to remove the animal from campus. The student is required to list an emergency contact person for removal of the animal.

Emergency Contact

Name	Phone Number	Email	Relation to student

By signing this document, I acknowledge that I have read and agree to the terms outlines above concerning assistance animal accommodations in DCAD housing. I agree to follow the guidelines provided to me and understand that failure to do so may result in the removal of my assistance animal.

Signature	Name	Date



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Student Name: _____ DOB: _____

Proposed ESA Name: _____ Type of Animal (species and breed): _____

Approximate Weight of Animal: _____ Age of Animal: _____

I authorize the medical provider listed below to discuss my condition(s) with DCAD on an as needed basis.

Student Signature: _____ Date: _____

The form below must be completed by a licensed clinical professional or health care provider familiar with the history and functional limitations of the student with no familial relationship to the student. If this space is inadequate, please attach additional paper or supporting materials.

As the licensed professional who has suggested that having an Emotional Support Animal (ESA) in campus housing may contribute to the student's treatment plan, please complete this form so that we may evaluate the request for this accommodation.

Medical Provider's Name: _____ Signature: _____

Address: _____

Email, phone, and/or fax: _____

License #: _____ Date: _____

How long have you treated or counseled the student? _____ Date of initial appointment: _____ Date of last office visit: _____

Please return this form to (mail) address above, (fax) 302.622.8870, (email) mfreeman@dcad.edu

1. What is the student's diagnosis? Please include the severity, symptoms, and date of diagnosis:

2. Identify the specific limitations/impairment caused by the disability and how this substantially limits the student's participation in one or more aspects of typical college life:

3. Explain how the accommodation of an ESA is necessary for the student to use and enjoy campus housing:

4. Have any other accommodations been identified that may be equally effective in allowing use and enjoyment of housing? If applicable, indicate any mitigating measures that have been tried, or are currently being used, and how they alleviate or eliminate limitations:

5. Have you discussed the responsibilities associated with properly caring for an animal while engaged in typical college activities and residing in campus housing? Do you believe those responsibilities might exacerbate the student's symptoms in any way?
