

### Animals in District Facilities

Please provide the following information about the assistance animal.

1. Parent/Staff and/or emergency contact information: \_\_\_\_\_  
\_\_\_\_\_
2. Type of assistance animal (breed, age, and history): \_\_\_\_\_  
\_\_\_\_\_
3. Insurance company insuring the assistance animal: \_\_\_\_\_  
Attached proof of insurance:  Received  Not Received
4. Proof of current and proper vaccinations:  Received  Not Received
5. Is the assistance animal required due to a disability?  Yes  No
6. Is the student/staff able to independently care for the service animal's needs (i.e., bathroom, feeding, cleaning up messes, hygiene, etc.)  Yes  No
7. Describe the nature of the work or task the assistance animal is trained, or is being trained to do or perform to<sup>1</sup> meet the student's/staff's individual needs:  
\_\_\_\_\_  
\_\_\_\_\_

10/24/13 | RS

<sup>1</sup>The district may request this information if the nature of the work or task the assistance animal is trained, or is being trained to do or perform, is not readily apparent.