

Emotional Support Animal Application

Release for Access Services to Contact Provider

When reviewing documentation for an Emotional Support Animal, there is potential that the Special Accommodation Committee will have questions that are helpful to clarify with your provider. In order to help streamline this process and to prevent any delays, Randolph College strongly encourages you to fill out the below information prior to providing your treating professional with the Request for Information (re: ESA) Form

1. Student full name: _____

2. Student email: _____

3. Campus address: _____

4. Permanent address: _____

5. Telephone number: _____

6. Type of animal being proposed for ESA: _____
(Please note that a person can be approved to have an ESA, but the type of ESA may be denied.)

7. Sex: Male Female Spayed/Neutered Yes No Age _____

8. Date of last rabies vaccination _____

9. Date of most recent health evaluation _____

10. Emergency Contact Name, telephone number and address (Must live within 25 miles of Randolph College)

11. Name of provider who will be completing the Request for Information Form:

12. Email address of provider: _____

13. Phone number of provider: _____

14. City and state where provider is located: _____

15. By signing below, you grant Randolph College permission to contact the above-named provider regarding any follow-up questions or clarification needs that potentially arise during the ESA application process and authorize the above-named provider to share information, including protected health information, relating to your ESA application with Randolph College. Your signature indicates that your provider may release information to Access Services that is relevant in regard to your request for an ESA.

X _____

Questions

1. Please describe the disability/condition for which you are requesting an ESA. How does your disability/condition impact you, especially in regard to housing?

2. What impact do you anticipate having an ESA will have on you as it relates to the symptoms/manifestation of your disability?

3. What kind of thought have you given for balancing care for your ESA with your own self-care, personal obligations, and finances?

4. ESAs are an accommodation for a specific person and therefore may not be left in the care of another student. What plans have you considered regarding the care of your ESA if you need to travel, become ill, or otherwise cannot care for it (whether for a short or long period of time)?

5. What information have you considered as far as making sure you have access to items to care for your ESA, such as food, replenishing/refreshing bedding or litter, flea/tick prevention, etc.?

6. Tell us a bit about your thought process as far as the wellbeing of your ESA and the limitations it might experience as a result of living in college housing (size of its living space, potential lack of interaction with other animals, etc.).

7. Is there anything else you would like for Access Services to know in regard to your request for ESA approval?
