College of Saint Rose
Emotional Support Animal Registration Form

An Emotional Support Animal is an animal that is recommended as necessary by a healthcare or mental health professional to provide emotional support or other assistance for a person with a disability, to alleviate one or more identified symptoms or effects of a person’s disability. In contrast with a service animal, an emotional support animal may be allowed as a reasonable accommodation. An emotional support animal, unlike a service animal, may not accompany a person with a disability beyond the residential setting (e.g., to academic buildings, libraries, dining halls, etc.).

If an Emotional Support Animal is required as a housing accommodation, the student must complete this form and submit it either in person or via e-mail to:

The Office of Services for Students with Disabilities (the “Office”)
The College of Saint Rose
432 Western Ave.
Albany, NY 12203
(518) 337-2335
Disability@strose.edu

To ensure that an emotional support accommodation request can be reviewed and addressed in a timely manner, the College encourages students to comply with the following deadlines:

- **February 1**: Due date for Continuing Students to Submit a new or Updated Housing Form for the following Fall Semester.
- **June 1**: Due date for New Incoming Students to Submit the Housing Form for the following Fall Semester.
- **December 1**: Due date for New and Continuing Students to Submit the Housing Form for the following Spring Semester.

When submitting this form to the Office, please also attach documentation of proof of vaccination for the recommended vaccinations for your Emotional Support Animal.

If a student’s disability or need for an Emotional Support Animal is not readily apparent, the Office may request that the student provide the Office with confirmation and supporting documentation from a licensed healthcare provider explaining your need for an Emotional Support Animal. The licensed healthcare provider’s documentation should set forth: (1) the credentials of the person completing the form; (2) the nature of the student’s disability; (3) that the animal is necessary to afford the student an equal opportunity to participate in campus housing and college programs; and (4) that there is a relationship between the student’s disability and the support the animal provides.

**General Student Information**

Student Name ____________________________________________

Student ID ____________________________________________ Phone __________________________

Email ____________________________________________

Campus Address ____________________________________________
Student Disability Information and Accommodation Information
Specify your diagnosis or diagnoses and provide the date of the original diagnosis

____________________________________________________________________________________
____________________________________________________________________________________

Please explain your rationale for requesting an emotional support animal as an accommodation:
____________________________________________________________________________________

Information about the Animal

<table>
<thead>
<tr>
<th>Name</th>
<th>Type of Animal</th>
<th>Breed</th>
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Vaccination and Medical History

____________________________________________________________________________________

Information about the Caring for the Emotional Support Animal

How will the animal be harnessed, leashed, or otherwise controlled when in a public space?
____________________________________________________________________________________

How will the animal be secured or caged when you are not present in the room?
____________________________________________________________________________________

What arrangements have you made for alternative care for times when you may be away such as on a weekend, for athletic or other participation that may take you away from campus in which leaving the animal unattended would be inappropriate?
____________________________________________________________________________________

Is the animal housebroken or will it be caged?
____________________________________________________________________________________

What is your process for disposing of the animal's fecal waste?
____________________________________________________________________________________

Please explain the feeding and watering needs of the animal.
____________________________________________________________________________________
____________________________________________________________________________________

What is your plan for storing the animal's food?
____________________________________________________________________________________

What is your plan to ensure, to the best of your ability, that the animal remains flea and tick-free?
____________________________________________________________________________________
How will you clean up after the animal if it becomes sick, incontinent, or vomits?

______________________________________________________________________________________
______________________________________________________________________________________

Please explain your process and plan for ensuring the animal is clean. Please include the recommended frequency for which the animal should be bathed.

______________________________________________________________________________________
______________________________________________________________________________________

Please explain the noises that your residence hall community should anticipate from the animal. How will you ensure the animal's behavior, noise level, and odor does not cause disruption to other students, both when you are present and when you are not?

______________________________________________________________________________________
______________________________________________________________________________________

**Student Agreement**

The student fully agrees to abide by the terms of the Emotional Support Animal Agreement, the College’s Student Accommodations Policy, and any and all other applicable College policies and local, state, and federal laws. The student agrees that it is the student’s responsibility to care for and supervise the animal and fully cooperate with all College faculty/staff and Residence Life staff when approached or confronted in any situation in which the animal is deemed to create an unsafe situation for others in the College community.

Signature_____________________________ Date________________________

**OFFICE USE ONLY**

Animal Approved_____________ (Date)

Veterinarian Records Verified (Date)

Name of Approving Staff Member _____________________