Service Animal Verification for Handlers

Name: ___________________________________________  Date: ___/___/____

Building__________________________  Room/Apartment #_____________________

Cell Phone: _________________  UGA Email: ________________________________

Please answer the following:

1. Is the dog a service animal required because of a disability?

2. What work or task has the dog been trained to perform?

By my signature, I verify that I understand the responsibilities listed and that they are in effect for the duration of my current University Housing contract. I know I am required to notify the assistant director of assignments and contracts of any changes with regard to the status of my service animal. Furthermore, I understand the verification will need to be updated for any subsequent contract year in which I reside in University Housing.

In case of emergency, who can take possession of the service animal?

Name: ___________________________________  Phone: _________________

Resident Signature: ________________________________  Date: ___/___/____

University Housing Use Only:

Verification Received Date:  Contract Year/Term(s)
_____/_____/_____  _______________________

Date Added to Shared Drive  Date Hall Staff Notified
_____/_____/_____  _____/_____/_____

Reviewed: March, 19, 2019
Revised: August 5, 2017