



**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

