Small Animal Management/Veterinary Medical Applications Permission Form: Handling & Working Companion/Livestock Animals

Students Name

(Please Print)		
Dear Parent(s) or Guardian(s),		
One of the attractions of my Smal Applications class is the use of coche purpose of hands on education and perform tasks and skills relate following species are included in esmall exotics, reptiles, horses, cattoe under direct supervision of the unattended at any time.	mpanion animals and certain spans. Students will have the opported to both small and large breed classroom skills labs but not limite, and sheep. All animals permanents	ecies of livestock for anity to safely learn animals. The nited to: dogs, cats, aitted on campus will
Any and all animals permitted on classes is required to provide annusuch as canine/feline rabies, caning infectious anemia, tetanus, encephrecords will be verified prior to an	nal proof of the state & area requested and area requested by the DHLPP, bordatella, equine rale alomyelitis, influenza, and strate	uired vaccinations bies, equine
The district and its employees shadamages property or causes harm applicable laws and regulations to community and those animals which	to anyone on campus. The distr protect the health and safety of	ict follows all
By signing below, I give permission participate in classroom skills labs acknowledge the risks associated a liable for any accidents or damage	s involving the previously ment and understand that the district	will not be held
Student Name (Print)	Student Signature	Date
Parent Name (Print)	Parent Signature	Date