## REQUEST FOR USE OF A SERVICE ANIMAL ON DISTRICT PROPERTY

Date:
Student Name:
Parent Name:
Employee Name:
Location:
Is the Service Animal required because of a disability?Yes No
Please describe what work or task the animal has been trained or is being trained to perform:
Service Animal:
Type: Dog
Name:
Owner Name:

I have read and understand the Steamboat Springs School District's Service Animals Policy NNP-43-E. I will abide by the terms of the Policy and any accompanying regulations. I represent that the Service Animal has been licensed, registered, and vaccinated in accordance with local and state laws, ordinances, and rules. I understand that it is my responsibility to care for and supervise the Service Animal and that I will be liable for any damage or injury the Service Animal causes the District or third parties. I understand that the District can ask me to promptly remove the Service Animal from District premises if the Service Animal is out of control and I do not take effective action to control it; the Service Animal is not housebroken, or poses a direct threat to the health or safety of others that cannot be eliminated by reasonable modifications to District policies, practices or procedures.

STUDENT:	
Signature	
Date:	
PARENT:	
Signature	_
Date:	
EMPLOYEE:	
Signature	_
Date:	
STEAMBOAT SPRINGS SCHOOL DISTRI	CT RE-2
BY:	
Signature	
Date:	_
Note: This Request form is valid through the renewed prior to the start of each subsequent Animal will be used.	
Submit Request to Principal/Superintendent	
Approved by:	
Date:	
4849-4633-6614, v. 2 Originally adopted: May 31, 2018	