



ANTIOCH COLLEGE

Emotional Support and Service Animal Registration and Agreement

Student Demographics

Name: _____

Phone Number: _____

Date: _____

Residence Hall: _____

Email: _____

Room Number: _____

Emotional Support Animal Student Agreement

By my signature below, I verify that I have read, understand and will abide by the requirements outlined in the Policy and I agree to provide the additional information required to complete my registration. I understand that if I fail to meet the requirements set forth in the Policy, Antioch College has the right to remove the Emotional Support or Service Animal and I will be nonetheless required to fulfill my housing, academic, and all other obligations for the remainder of the housing contract.

I furthermore give permission to the Student Success Services Coordinator to disclose to others impacted by the presence of my Emotional Support Animal (e.g., Residence Life staff, potential and/or actual roommate(s)/neighbors) that I will be living with an animal as an accommodation. I understand that this information will be shared with the intent of preparing for the presence of the Emotional Support Animal and/or resolving any potential issues associated with the presence of the Emotional Support Animal.

I further recognize that the presence of the Emotional Support Animal may be noticed by others visiting or residing in College housing and agree that staff may acknowledge the presence of the animal, and explain that under certain circumstances Emotional Support Animals are permitted for persons with disabilities. I have reviewed, understand, and agree to the conditions and procedures stated above. I further understand that I assume full responsibility, financial or otherwise, for the actions of my Emotional Support or Service Animal and that I will comply with all the applicable Ohio statutes.

Student/Employee (Print name)

Signature

Date

(If student or employee is under 18, signature of parent or legal guardian is required.)

Student Success Services Coordinator

Signature

Date

Dean of Students

Signature

Date

SERVICE AND EMOTIONAL SUPPORT ANIMAL RECORD SHEET

If the College grants an Owner's request to live with an Emotional Support Animal, the Owner is solely responsible for its custody and care.

Animal Demographics

Animal: Emotional Support or Service?

Species: _____

Name: _____

Breed (if applicable): _____

Age: _____

Color: _____

Weight: _____

Diet: _____

Reliably Housebroken? Yes No

Crate-trained? Yes No

Any history of aggressive or disruptive behavior towards humans or other animals? Yes No

If yes, please explain:

Requirements Checklist

Antioch College requires that all animals abide by state and local ordinances for vaccination. Animals that pose a risk to transmit zoonotic diseases that cannot be reasonably mitigated through vaccination will not be accepted. Generally, a dog must be at least 10 months of age to live on campus to assure that the dog is reliably housebroken, not disruptive to other residents and has all of the shots necessary to make it safe to be around humans and other animals that may be in residence. *Please note that in accordance with Ohio laws poisonous, exotic, or dangerous animals are not permitted on campus at any time.*

Veterinarian Name: _____ Phone: _____

Address: _____

Documentation of Updated Vaccinations

Dogs – Core Vaccines, as recommended by the WSAVA.

Rabies

Parvovirus (CPV)

Distemper Virus (CDV)

Hepatitis Adenovirus Type 2 (CAV)

Cats – Core Vaccines, as recommended by the WSAVA

Rabies

Herpesvirus 1 (FHV-1)

Panleukopenia (FPV)

Calicivirus (FCV)

Leukemia (FELV)

Other Animal: _____ *

Rabies (if applicable)

* Additional vaccination requirements will be determined by consulting with recognized authorities in the field of animal healthcare and wellness.

Annual animal wellness examination completed by a licensed veterinarian

Record of sterilization (e.g. spay or neuter)

Dogs only: Copy of animal registration license – According to OH law, all dogs three months or older must be registered with the county they are living in; Greene County residents must register their dog with the Greene County Auditor.

Current, clear picture of the animal - Owner must coordinate with Residence Life Coordinator to arrange for a picture to be taken upon move in.

Information or pictures regarding the container or enclosure in which the animal will be contained

Optional: Emergency Boarding Accommodations – List a local temporary boarding facility for the animal if there is one with which you already have an **established relationship**. The student/employee assumes financial obligation of boarding in the event of an emergency. It will be the responsibility of one of your Emergency Contacts to get your animal to the boarding facility.

Name: _____

Address: _____

Email: _____

Phone: _____

Emergency Contact Agreement Form #1

As per College policy, an emergency contact person is a non-resident, who agrees to take the animal in the event of an emergency and/or removal from College housing. In the event of an emergency and/or removal, emergency contacts must retrieve the animal within 12 hours or the College reserves the right to surrender the animal to a local animal shelter. A person cannot be listed as an emergency contact until they have signed the Antioch College Emergency Contact Agreement. Antioch College reserves the right to contact the emergency contact listed to ensure that they understand the role and agree to its conditions. If the emergency contact is no longer able to fulfil the responsibilities of this role, the student must provide an alternate emergency contact person; failure to do so will result in a temporary removal of the animal

The first person listed will be the first person contacted and assumed to take immediate responsibility for the care of the animal. This person may also be the person who will care for and be responsible for your animal during your co-op terms. The second person listed will be contacted and assumed to take immediate responsibility for the care of the animal should the first person be unavailable or unable to take immediate responsibility for the care of the animal.

First Emergency Contact:

Name: _____

Relationship to owner: _____

Address: _____

Email: _____

Phone: _____

Can you transport the animal from the residence hall on campus to an emergency boarding accommodation if needed? Yes No

Signature indicating agreement to care for animal:

Name

Date

Emergency Contact Agreement Form #2

As per College policy, an emergency contact person is a non-resident, who agrees to take the animal in the event of an emergency and/or removal from College housing. In the event of an emergency and/or removal, emergency contacts must retrieve the animal within 12 hours or the College reserves the right to surrender the animal to a local animal shelter. A person cannot be listed as an emergency contact until they have signed the Antioch College Emergency Contact Agreement. Antioch College reserves the right to contact the emergency contact listed to ensure that they understand the role and agree to its conditions. If the emergency contact is no longer able to fulfil the responsibilities of this role, the student must provide an alternate emergency contact person; failure to do so will result in a temporary removal of the animal

The first person listed will be the first person contacted and assumed to take immediate responsibility for the care of the animal. This person may also be the person who will care for and be responsible for your animal during your co-op terms. The second person listed will be contacted and assumed to take immediate responsibility for the care of the animal should the first person be unavailable or unable to take immediate responsibility for the care of the animal.

Second Emergency Contact

Name: _____

Relationship to owner: _____

Address: _____

Email: _____

Phone: _____

Can you transport the animal from the residence hall on campus to an emergency boarding accommodation if needed? Yes No

Signature indicating agreement to care for animal:

Name _____ Date _____

Roommate Acknowledgement

for sharing of Antioch College residence with owner of a service or emotional support animal

Name of roommate who is the owner: _____

Name and type of animal: _____

By my signature below, I acknowledge that I will share my assigned Antioch College housing with a roommate/suitemate that has an approved service or Emotional Support Animal. Should I have any concerns regarding the behavior, location, or care of the animal, I will first discuss my concerns with the animal's owner. If I continue to have concerns I will contact my Resident Assistant or the Residence Life Coordinator.

Roommate's name	Signature	Date
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Roommate's name	Signature	Date
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Roommate's name	Signature	Date
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Roommate's name	Signature	Date
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Roommate's name	Signature	Date
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Roommate's name	Signature	Date
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Roommate's name	Signature	Date
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