



DIXIE STATE UNIVERSITY

APPLICATION FOR REASONABLE ACCOMMODATION FOR AN ASSISTANCE ANIMAL IN CAMPUS HOUSING

NAME OF RESIDENT: _____ ID: _____

ADDRESS: _____

DOB: _____

TELEPHONE #: _____

PERSON REQUESTING ACCOMMODATION: _____

RELATIONSHIP TO RESIDENT (IF DIFFERENT FROM RESIDENT): _____

DATE REASONABLE ACCOMODATION REQUEST MADE: _____

1. Type of animal: _____

2. Do you have a physical or mental disability (ies) that substantially limits one or more major life activity? _____

3. Does the Assistance Animal for which you are making a reasonable accommodation request provide emotional support for you that alleviate one or more of the identified symptoms or effects of your disability(ies)? _____

a. If the answer to (3) is YES,

i. Provide appropriate documentation from a health or social service professional indicating that you have a disability(ies). (i.e., you have a physical or mental impairment that substantially limits one or more major life activities) and have a need for an Assistance Animal.

4. Are you the spouse or child of a student seeking to living in married student housing? _____

a. If the answer to (4) is YES,

i. Provide documentation of the legal relationship between yourself and the student.