

## Accommodation Process for Comfort Animal in Campus Housing

According to UNT Policy 04.026, accommodation requests for a comfort animal must be filed with the Office of Disability Access. The accommodation request must document the link between the presence of the comfort animal and a documented disability. Generally, dogs and cats are commonly used as comfort animals; although other animals may serve in this capacity. For the health and safety of residents, the University is not required to accept snakes, reptiles, ferrets, rodents, sugar gliders, or spiders since these animals cannot meet vaccination requirements to be certified as disease free.

Approved comfort animals **must be contained within the campus housing unit of the owner**, except when transported outside the residential area in an animal carrier or controlled on a leash or harness. Comfort animals are not permitted in any other university facilities.

### The specific steps for requesting a Comfort Animal are as follows:

1. A student must submit all completed applicable forms and accompanying vaccination documents to the Office of Disability Access which includes:
  - a. ODA Registration Form by logging into [ODA Online Student Services](#) (if new to ODA).
  - b. Comfort Animal in Campus Housing Accommodation Request Form
  - c. Comfort Animal in Campus Housing Documentation Form
  - d. Annual Verification of Vaccination/Animal Health Form and accompanying documents (see attached *Verification of Comfort Animal Vaccination/Health Information*) - this information will be shared with the Department of Housing and Residence Life
2. A student should provide recent documentation of the disability and disability-related need for a comfort animal from a qualified provider (treating psychiatrist, psychologist, or other mental health professional). Documentation should include recommendations for accommodations that are directly related to the functional limitations, including a rationale explaining why each recommendation for accommodation is appropriate.
3. Requests for comfort animals will reviewed on an individualized basis.
4. Students will be notified of the committee's decision by their assigned Student Services Coordinator by email. If the request is approved, the Department of Housing and Residence Life will notify the student of any applicable housing policies and owner responsibilities.
5. The ODA will also submit the following information to the Department of Housing and Residence Life for compliance purposes. Student will be responsible for updating this information annually with the Department of Housing and Residence Life.
  - a. Annual Verification of Vaccination/Animal Health Form – to be completed only by licensed Veterinarian
  - b. Picture of the Certificate of Registration with city of Denton
  - c. Picture of rabies tag
  - d. Vaccination certificate/Shot Record
  - e. Current color picture of animal
6. Incomplete applications and documentation will not be reviewed, and students will be notified by his/her Student Services Coordinator. Questions about the forms or information required should be addressed to ODA.
7. A denied request for this accommodation may be appealed by filing a complaint with the ADA Coordinator in the Division of Institutional Equity and Diversity located in Hurley Administration Building Room 175. The office may also be reached at (940) 565-2759 or via email at [oeo@unt.edu](mailto:oeo@unt.edu).

## Documentation Criteria

Documentation of a significant mental health disability and the associated need for a comfort animal should come from a mental health provider with whom an established provider-patient relationship exists and can explain how the presence of the animal may help to alleviate one or more symptoms or effects of the disability.

ESA/Comfort Animal certificates, ID badges, vests, online registries, etc., are not necessary nor considered in the approval process of an ESA. Please consider this information before spending money on the purchase of such letters, as they will rarely provide the information necessary to support a Comfort Animal/ESA request, and are not viewed by the institution as a reliable source of information.

Completed forms can be submitted to ODA via email at [Apply.ODA@unt.edu](mailto:Apply.ODA@unt.edu) (preferred) **OR** mail, fax, or deliver in person to: UNT ODA, Sage Hall 167, 1155 Union Circle #310770, Denton, TX 76203, Fax: 940.369.7969, Phone: 940.565.4323

## Comfort Animal Requirements

1. **Vaccinations.** Comfort animals must have required vaccinations or license pursuant to local law. Dogs must wear a rabies vaccination tag.
2. **Licensing.** The owner must abide by current city, county and state ordinances, laws, and/or regulations pertaining to the licensing, vaccination, and other requirements of animal ownership applicable to the owner's species of comfort animal. It is the owner's responsibility to know and understand all applicable ordinances, laws, and regulations in addition to university policies applicable to their comfort animal. The university has the right to request documentation of compliance with such ordinances, laws and/or regulations, which may include presentation of vaccination certificate(s), registration or licensing documentation.
3. **Types of Animals:** Generally, dogs and cats are commonly requested as comfort animals; although other animals may serve in this capacity. For the health and safety of residents, the university is not required to grant non-domesticated or unique animals such as snakes, reptiles, barnyards animals, moneys, spiders, or other insects as reasonable accommodations.
4. **Age.** Comfort animals must be at least six months of age.
5. **Documentation.** The university reserves the right to require updated veterinary records or other evidence of the health of the animal at any time.
6. **Annual Verification.** Completion and submission of forms with accompanying records to verify current subscription for comfort animal and vaccination and good health of the comfort animal must be provided prior to each fall term of residence to the Department of Housing and Residence Life. No comfort animal will be permitted in university housing without annual submission of the above described documents.

## Responsibilities of Comfort Animal Owner

It is an expectation of the ODA and the Department of Housing and Residence Life that you will review and abide by UNT Policy 16.002, Office of Disability Access guidelines, and Department of Housing and Residence Life policies, procedures, and community standards.

The comfort animal owner's responsibilities and examples of what may result in removal of a comfort animal can be found in UNT Policy 16.002 (refer to the policy at [https://policy.unt.edu/sites/default/files/16.002\\_ServiceComfortAnimals\\_2014.pdf](https://policy.unt.edu/sites/default/files/16.002_ServiceComfortAnimals_2014.pdf) for specifics). Please be sure to review any additional policies, procedures, and community standards of the Department of Housing and Residence Life.



## Comfort Animal in Campus Housing Accommodation Request Form

(To be completed by student)

First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Last: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Classification: \_\_\_\_\_ Residence Hall and Room Number: \_\_\_\_\_

What is your disability(ies)? \_\_\_\_\_

When was your disability diagnosed? \_\_\_\_\_

### Section 2

Species of animal which you wish to keep in Campus housing: \_\_\_\_\_

Approximate measurements of animal in inches Length: \_\_\_\_\_ Width: \_\_\_\_\_

Height: \_\_\_\_\_ Approximate weight in pounds: \_\_\_\_\_ Age in years: \_\_\_\_\_

Name of your animal: \_\_\_\_\_ How long have you owned it: \_\_\_\_\_

When was your animal last vaccinated: \_\_\_\_\_

**How does your disability affect you in a residential setting? How would having this animal address that barrier?  
(You can answer on a separate page, if you need additional space.)**

By signing below you are acknowledging that the information provided on this form is true and accurate; and that you will review and abide by UNT Policy 16.002, Office of Disability Access guidelines, and Department of Housing and Residence Life policies, procedures, and community standards. Further, if your animal is approved you consent to our office disclosing this accommodation to administrators or other staff in UNT Housing who have a need to know.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Comfort Animal in Campus Housing Documentation Form

(To be completed by student's treating professional, a licensed Psychologist, Psychiatrists, LPC,  
or other qualified individual not related to student)

Patient First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Patient Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Severity? Mild: \_\_\_\_\_ Moderate: \_\_\_\_\_ Severe: \_\_\_\_\_

Date you first treated this individual: \_\_\_\_\_ Date you last treated this Individual: \_\_\_\_\_

Is the student currently under your care? Yes: \_\_\_\_\_ No: \_\_\_\_\_ Date of Diagnosis: \_\_\_\_\_

**How did you arrive at your diagnosis?** Please check all that apply. Please add any notes below.

Criteria	Additional Notes
Structured or Unstructured interviews with the student	
Interviews with other persons	
Behavioral Observations	
Developmental History	
Educational History	
Medical History	
Neuro-psychological testing.	Date(s) of Testing
Standardized or Nonstandardized rating scales	
Other (please specify)	

**What specific symptoms will be reduced** by having the comfort animal live with the student? How will those symptoms be mitigated by the presence of the comfort animal?

In your opinion, how important is it for the student's well-being that an ESA be in residence on campus?  
What **consequences**, in terms of disability symptomology, may result **if this accommodation is not approved**?

Have you discussed the responsibilities associated with properly caring for an animal while engaged in typical college activities and residing in campus housing? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Do you believe those responsibilities might exacerbate the student's symptoms in any way? Yes: \_\_\_\_ No: \_\_\_\_

If yes, please elaborate your concerns.

### **Healthcare Provider Information**

Provider Name (Print): \_\_\_\_\_

Title: \_\_\_\_\_

Name of Practice/Company: \_\_\_\_\_

License or Certification #: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Signature of Treating

Professional: \_\_\_\_\_ Date: \_\_\_\_\_

## Verification of Comfort Animal Vaccination/Health Information

The following information regarding your comfort animal must be submitted to the ODA with your original request for a comfort animal in order to verify the health and appropriateness of the comfort animal you are requesting. This information will be shared with the Department of Housing and Residential Life. The comfort animal itself must be approved before it moves into on-campus housing.

- 1) **Annual Verification of Vaccination/Animal Health Form** – to be completed only by licensed Veterinarian
- 2) The following **MUST** be submitted with the Annual Verification
  - a. Comfort Animal in Campus Housing Documentation Form
  - b. Annual Verification of Vaccination/Animal Health Form – to be completed only by licensed Veterinarian
  - c. **Picture of Certificate of Registration with city of Denton**
  - d. Picture of rabies tag
  - e. Vaccination certificate/Shot Record
  - f. Current color picture of animal

**NOTE: Your comfort animal's vaccination and health status will have to be verified annually. You will be required to update and submit documents listed above to the Department of Housing and Residential Life each August at least 14 days before the animal moves into on-campus housing. Your comfort animal will not be allowed back on campus until these documents have been submitted and you receive confirmation from the Department of Housing and Residential Life to move your comfort animal in.**

It is an expectation of the ODA and the Department of Housing and Residential Life that you will review and abide by university policy as outlined in 04.026, Office of Disability Accommodation guidelines, and Department of Housing and Residence Life policies, procedures, and community standards.

Please refer to the Department of Housing and Residence Life website or staff for information regarding their policies, procedures, and community standards.



## Annual Verification of Vaccination/Animal Health Form

### Section 1: (To be completed by student)

First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Last: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Section 2 (To be completed only by licensed Veterinarian)

Species/Breed of animal: \_\_\_\_\_ Age in years: \_\_\_\_\_

Date you last examined this animal: \_\_\_\_\_

When was this animal last vaccinated or determined to be in good health? \* \_\_\_\_\_

#### \* Please attach vaccination certificate/shot records or health records (if vaccination not required due to species)

- In your opinion, is this animal healthy? Yes \_\_\_ No \_\_\_
- Does the animal have fleas, ticks, other parasites? Yes \_\_\_ No \_\_\_
- Would animal function well enclosed in a college dorm room for long periods of time? Yes \_\_\_ No \_\_\_
- **Have you been made aware or have record of** animal's potential to bite or harm others? Yes \_\_\_ No \_\_\_
- Does the animal have rabies or any other condition that could harm humans? Yes \_\_\_ No \_\_\_

Please verify any training (formal or informal) that you are aware of which qualifies this animal to be classified as a comfort animal.

Is there anything else you would like us to know about this animal? Or if you indicated yes to animal's potential to bite or harm others, please explain.

### Veterinarian Information

Provider Name (Print): \_\_\_\_\_

Title and License #: \_\_\_\_\_

Name of Practice/Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Signature of Veterinarian \_\_\_\_\_ Date: \_\_\_\_\_