EDU 432 6/23



Voluntary Service Animal and Service Animal in Training Registration

The information on this form is submitted voluntarily by the handler and will be used by the College only to facilitate interactions between the handler, service animal, or service animal in training, and the College community.

Handler Name				
Address				
City, State, Zip				
Phone				
Email				
Please answer the follow	ving questions:			
Is this Service Animal* required because of a disability?			YES	NO
2. What work or task** h	as the Service Animal b	peen individually trained	to perform?	
3. Is this a Service Animal in Training?			YES	NO
directly related to and mitigate: **The ADA does not recognize e	s their handler's disability. emotional support, comfort, the service animals in training,	nerapy animals, or service ar the State of Michigan require	trained to perform work or a task nimals-in-training. However, while s service animals in training to be	the
Select One	Dog	Miniatu	re Horse	
Animal Name		,		
Breed				
Primary Color(s)				
Sex (M/F)		Age (yrs.)		
Shoulder Height (in.)		Weight (lbs	s.)	
Dog License Number		Expiration	Date	
		•		
Handler Signature:			Date:	

NOTE: A copy of the dog license is required with this document. Please report any changes in handler and/or Service Animal information to the campus Public Safety office.