This updated form is available here:[**https://sdrc.ucr.edu/assistive-animals**](https://sdrc.ucr.edu/assistive-animals)

**Request for Emotional Support Animal (ESA) in University Owned Housing**

***Introduction and Explanation of the Purpose of this Form.*** *Under federal and state laws, individuals with disabilities are protected from discrimination and may be entitled to reasonable accommodations. To establish that an individual is covered under these laws when the disability is not readily apparent (such as a psychiatric disability) UCR’s Student Disability Resource Center (SDRC) must receive documentation (1) establishing the individual’s disability; (2) describing the needed accommodation; and (3) establishing that the accommodation is necessary to afford equal opportunity under the law. A diagnosis of a disorder in and of itself does not automatically qualify an individual for accommodations.*

**Student or Resident**:

Please return this completed form to SDRC. If you are a student, the information you provide will notbecome part of your academic records at UCR, but will be kept in your file at SDRC, where it will be held in accordance with FERPA. The SDRC complies with both federal and state discrimination laws as well California’s AB 468 (Gov. Code § 12955.6), which addresses legal requirements for health care practitioners recommending ESAs. If you are approved for an ESA in student housing, you will then be required to provided additional information about your specific animal, including vaccinations, information to verify that your animal is not a direct threat to health/safety of others, and identification information (color, breed, weight) and a photograph in case of emergency (see below, pages 3-5). Please contact us if you have questions or concerns. Thank you.

**Please sign below before providing the form on the next page to your medical health provider to complete:**

By signing below, I consent to allowing my health care provider to share any information relevant to my need for an ESA as an accommodation, as shown on this form, with UCR’s SDRC office for the next 60 days.

Student or Resident Name (Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_

***Provider****: The named individual has stated that you are the treating medical provider for the mental health care condition for which they are requesting an Emotional Support Animal (ESA) in student housing. The University will accept documentation from providers in California or the students' home state consistent with California’s AB 468 (Gov. Code § 12955.6). This form may be released to the individual at their request. So that we may evaluate the request for this accommodation, please answer the following questions:*

**Medical Provider’s Information in Support of Request for Emotional Support Animal Approval**

Name of Professional completing form:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Professional’s place of business/employment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address, Phone & Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Patient:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

They have been under my care since: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* I am familiar with the patient’s history and with the functional limitations imposed by his/her disability. They meet the definition of disability under the Americans with Disabilities Act, the Fair Housing Act, and the Rehabilitation Act of 1973.
* Due to disability, the patient has certain limitations. In order to help alleviate these, and to enhance their ability to live independently, I am recommending an emotional support animal that will assist them in coping with their disability.
* I certify that am licensed to provide professional services as follows:

Type of License: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Jurisdiction:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

License #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Is there anything else you believe we should know in support of the Patient’s request for an ESA? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physician or Clinician Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**After SDRC grants general approval for an ESA, the following ANIMAL REGISTRATION AND USER INFORMATION must be submitted to approve your specific animal, and further below you need to agree/sign the guidelines for ESA care in the residential community:**

Basic Information

1. Owner’s name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Owner’s address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Owner’s cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. User’s name (if different):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_User/Owner email: \_\_\_\_\_\_\_\_\_\_\_\_\_

*Questions below are important in case of emergency or missing animal.*

1. Name of Animal:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Type of Animal:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Weight of Animal:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Physical Description of Animal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Photo of Animal is attached? YES \_\_
2. Alternate Caregiver if you are unavailable (illness, injury, etc.) to care for your animal (should not be someone living in UCR Housing):

-Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

-Phone # and/or email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Guidelines for Maintaining an Emotional Support**

**Animal within the Residential Community**

**Introduction**

The following guidelines apply to all approved animals and their owners who live in the UCR residential community unless the nature of the documented disability of the owner precludes adherence to these guidelines.

**Animal Behavior**

1. An Exception to the Pet Policy is granted for Emotional Support Animals provided that their behavior, noise, odor and waste do not exceed reasonable standards for a well-behaved pet and that these factors do not create unreasonable disruptions for residents (registered students and resident family members) and Housing Services staff.

2. Dangerous, poisonous, and/or illegal animals are not permitted.

3. The approved Emotional Support Animal must be contained within the private residential area (room, suite, apartment, enclosed balcony or yard spaces) at all times, except when transported outside the private residential area in an animal carrier or controlled by leash or harness (\*for service animals the rules are different around leashes, consistent with federal/state law).

**Animal Health and Well-Being**

1. All Emotional Support Animals must have current vaccinations as required by the Riverside County Department of Animal Services: <https://www.rcdas.org/index.php/services/pet-services/vaccinations>. Documentation of vaccinations is due at time of approval. Housing Services reserves the right to request an updated verification at any time during the animal’s residency. Riverside County Law ([Regulation § 6.08.120](http://riversidecounty-ca.elaws.us/code/coor_title6_ch6.08_sec6.08.120#:~:text=No%20person%20may%20own%2C%20keep,in%20accordance%20with%20this%20chapter)) also require pets to be spayed/neutered (with a process for applying for an exemption), and Residents with ESAs must comply with this Law.

2. Riverside County Law requires all dogs over four months of age to be licensed. The license must be obtained and kept current in compliance with the local dog license requirements. Housing Services reserves the right to request proof of licensing at any time during the animal’s residency.

3. In accordance with local dog licensing laws, all dogs outside the home, must wear a current license tag.

**Animal Cleanliness:**

1. Owners are responsible for properly containing and disposing of all animal fecal waste.

1. All animal waste inside the dwelling, such as cat litter, must be placed in a sturdy plastic bag and tied securely before being disposed of in outside trash dumpsters. Litter boxes should be placed on mats so that feces and urine are not tracked onto carpeted surfaces.
2. All animal waste outside the dwelling, such as dog feces, must be immediately retrieved by owner, placed in a plastic bag and securely tied before being disposed of in outside trash dumpsters.

**Resident Responsibilities:**

* All animals must be kept indoors; if taken outside, the animal must be on a leash or harness.
* The resident is responsible for disposal of all animal waste.
* Problems of uncontrollable noise (barking) or feces/urine will be handled as a housing conduct matter. The resolution of the conduct matter could result in termination of the exception to the pet policy (removal of the animal).
* If the resident owner is leaving campus for a prolonged time period such as overnight, weekends, school/holiday breaks, etc. the Resident owner is expected to make appropriate arrangements for the animal’s care.
* Should the animal be removed from the premises for any reason, the owner is expected to fulfill his/her housing obligations for the remainder of the housing contract.

The resident owner must provide the following documentation five days prior to the expected or actual move-in date of the animal:

* Submit completed Animal Registration Form (see above, page 2)
* Photo of approved animal
* Proof of vaccinations from a veterinarian Proof of compliance with neutering/spaying County regulation
* If the emotional support animal is a dog, proof of obtaining dog license from the City of Riverside is required

Any violation of the above rules will be reviewed through the Residential Student Conduct Process and the student will be afforded all rights of due process and appeal as outlined in that process.

By my signature below, I verify that I have read, understand and will abide by the Guidelines outlined here and I agree to provide the additional information required to complete my Request for an Exception to the Pet Policy.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Resident/Owner Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Senior Director of Housing Services Date