



PARENT REQUEST FOR SERVICE ANIMAL

Student Name _____

School _____

Parent's Name _____

Parent, please answer the following questions as per Mansfield ISD Board Policy FBA (LEGAL).

1. Is the service animal required because of a disability?

2. What work or task(s) has the animal been trained to perform?

I, _____, release my child's treating physician to share with MISD information
Print Parent Name
relating to my child's need to have a service animal at school. My signature below indicates that I have read and understand the definition of a service animal according to Mansfield ISD Board Policy FBA (LEGAL), ADA 28 CFR 35.104.

Parent signature

Date

I. TREATING PHYSICIAN

Please state what work or task(s) the service animal performs for this student.

Print Name Treating Physician

Date

Signature Treating Physician

Contact Email

Phone Number

II. Parents, please attach any written documentation from the trainer, training school, and/or veterinarian you wish for the school to have as information in consideration of your request.

According to the MISD student handbook and FBA (LEGAL): the parent of a student who uses a service/assistance animal because of the student's disability must submit a request in writing to the principal at least 10 district business days before bringing the service/assistance animal on campus.