

Dell Rapids School District #49-3



Policies and Regulations Code: E – Support Services

EH-E SERVICE ANIMALS AT SCHOOL INFORMATIONAL SHEET (NOT REQUIRED)

Date: _____

Handler's Name: _____

Child's Guardian: _____

Building: _____

The following information is requested on a voluntary basis (not required):

If not readily apparent, identify and describe the task or work the service animal has been trained to perform as it relates to the staff or the student's disability.

Type of Service Animal:

Dog

Documentation of current vaccinations required under state or local laws is attached.

If not readily apparent the Service Animal is:

Required because of a disability.

Trained to perform certain work or tasks for the person with disabilities.

I have read and understand the school district's Service Animal Policy. I understand that if the service animal is: out of control and/or the animal's handler does not take effective action to control it; or the animal is not housebroken, the School District has the discretion to exclude or remove my service animal from its property. If the service animal is excluded from the premises, the School District will continue to allow the disabled person the opportunity to participate in the service, program or activity without the service animal.

I understand that I am responsible for any and all damage to school district property, personal property, injury to individuals caused by my service animal, to the same extent that other non-disabled persons would be held liable for any such damages.

Owner (Printed)

Administrator (Printed)

Signature

Signature

Date: _____

Date: _____

Note: This Informational Sheet must be updated each school year or whenever a different service animal will be used