

EQUAL EDUCATIONAL OPPORTUNITY
SERVICE ANIMALS

FBA
EXHIBIT B

EXHIBIT B

REQUEST FOR ADULT HANDLER TO ACCOMPANY STUDENT
AND SERVICE/ASSISTANCE ANIMAL OR MINIATURE HORSE
ON CAMPUS AND IN DISTRICT FACILITIES

The District will try to accommodate a request for a service/assistance animal or miniature horse to accompany a student on campus as soon as possible but will do so within ten District business days. This completed form must be returned to the campus principal.

Student's name: _____ Date: _____

Current grade level: _____

Campus: _____

Home address: _____

City, State, and Zip code: _____

Parent's name (*print*): _____

Phone number: _____

Complete the following portion ONLY if the adult handler is someone other than the student's parent.

Name (*print*): _____

Home address: _____

City, State, and Zip code: _____

Phone number: _____

Adult Handler's Acknowledgment

I understand that before I may accompany _____ (*student's name*) on campus or in a facility to handle the animal, the District will pay to conduct a criminal history check on me.

I understand that upon approval of this request, I will be required to comply with all campus visitor procedures.

I understand that as the handler for _____'s (*student's name*) animal, I play a central role in the integration of the animal into the school setting.

I understand that I am to adhere to all applicable District policies and regulations.

Adult handler's signature: _____

Date: _____

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Parent/Guardian Acknowledgment

I understand that _____ (*adult handler's name*) will not be permitted to accompany my child on any school campus or District facility prior to the completion of a criminal history check and final approval from the Superintendent.

Parent's signature: _____

Date: _____

For Office Use Only

Criminal history check completed:

- ☐ Yes
☐ No

Request:

- ☐ Approved
☐ Denied

Principal's signature: _____

Date: _____

Superintendent's signature: _____

Date: _____