Request for Adult Handler to Accompany Student and Service Animal on Campus and in District Facilities

(Please print.)

Student's name: _____

Date: _____

Address: _____

Current grade level: _____

Campus: _____

Parent or Guardian's name: _____

Phone number: _____

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*(Complete the following portion **only** if the adult handler is someone other than the student's parent.)*

Name of non-employee adult: _____

Address: _____

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: _____

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/guardian's signature: _____

Date:_____

For Office Use Only

Criminal history check completed?

☐ Yes

☐ No

Request is:

☐ Approved

☐ Denied

Principal's signature: _____

Date:_____

Assistant Superintendent's signature: _____

Date:_____