

1000 E. Victoria Street – WH B470 & Carson, CA 90747 & (310) 243-3771 & FAX (516)3595

SERVICE ANIMAL REGISTRATION FORM

Student (submit to Disabled Student Services (DDS – located WH 180)					
Employee or Visitor (submit to Human Resources (HR- located WH 340)					
Employee/Student ID Name of Owner/Handler					
Address					
City State Zip Code					
Type of Service Animal Breed					
Color					
Animal's City/County License Tag #					
Date of Last Rabies Vaccination Veterinarian					
Is verification of your disability on file with DDS or Human Resources? Yes No					
Request access to Restricted Area:					
If yes, explain where and why					
What convice is your animal providing relative to your disability?					
What service is your animal providing relative to your disability?					

The owner/handler of the service animal listed above understands and agrees to the following:

- Will follow the University Policy in cleaning up after the animal defecates. The owner/handler will always carry equipment sufficient to clean up the animal's feces whenever the animal and the handler are on University Property.
- The owner/ handler accepts his/her potential liability should a service animal injure someone.

Weekends Only: If a student or visitor is going to be on campus for only one weekend (Saturday-Sunday), he/she can visit the Campus Police Department on the day of the visit to register the service animal. The owner/handler of the service animal must complete this form when registering the animal with the police.

I have read and understand my responsibility as owner/handler of a service animal and certify that the information provided above is true and correct:					
Signature Owner/Handler:					
Date	:				
Decision to have Service Animal on Campus:					
	Director of DDS:	□¹ _{Yes}	□ No		
Or	Assoc. Vice President, Human Resources:	Yes	□ No		
Signature of Director of DDS or Associate Vice President Human Resources:					
Date	:				

cc: Service Animal Request File Department Head Vice President/Provost