

EMAIL: aso@owu.edu

Accessibility Services Office Emotional Support Animal Policy and Application

Emotional Support Animal Guidelines

Ohio Wesleyan University is committed to providing housing accommodations to students with disabilities in compliance with the most recent guidance from the Department of Housing and Urban Development (HUD) and the Fair Housing Act (FHA). Students with disabilities who require the use of an Emotional Support Animal (ESA) may be permitted to bring an animal to campus as long as they comply with this university policy regarding ESAs.

An ESA may be an accommodation for a student with a disability, but only within the student's dwelling. Students may qualify for this accommodation if there is an identifiable and documented nexus between the disability and the support that the animal provides. A student may be approved for up to one animal. No offspring of the ESA will be allowed.

<u>Questions, concerns, and grievances</u> should be directed to Coordinator of the Accessibility Services Office- aso@owu.edu

Definitions

An **emotional support animal (ESA)** is an accommodation that is necessary to afford an individual with a disability equal opportunity to use and enjoy their university housing. An ESA provides amelioration of one (1) or more symptoms related to the individual with a disability. ESAs **do not** perform work or specific tasks that a "service animal" (SA) under the Americans with Disabilities Act (ADA). ESAs are not pets. For more information about pets on campus, refer to the pet policy in the OWU Student Handbook. For more information about SA's, refer to the SA policy in the OWU Student Handbook.

The **owner** is the student who has been permitted to keep an emotional support animal in university housing under this policy.

A **service animal,** as defined by the Americans with Disabilities Act (ADA), is a dog individually trained to do work or perform tasks for people with disabilities. Service animals are working animals, not emotional support animals or pets. For more information about pets on campus, refer to the pet policy in the OWU Student Handbook. For more information on service animals, refer to the service animal policy in the OWU Student Handbook.

A **pet** is any animal kept for company, protection, or other ordinary reasons. The pet policy in the residential facilities does not apply to ESAs or service animals as they are not pets. For more information, refer to the pet policy and the service animal policy in the OWU Student Handbook.

ESA Approval Process

- 1. The student contacts the Coordinator of the Accessibility Services Office to discuss the request for an ESA and obtain the required paperwork.
- 2. The student must submit the following:
 - a. Emotional Support Animal Request Form
 - b. ESA Documentation Form
 - The student's appropriate Mental Health Care Provider must complete ESA Documentation Form.
 - ii. The mental health care provider must have diagnosed and/or is currently treating the student.
 - iii. If the student mental health care provider cannot complete the form, the student's family health care provider may complete the form. However, the student will be required to submit a supplemental letter of acknowledgement from a mental health care provider regarding the support of an ESA.
 - c. Veterinarian Verification Form (completed by the ESA's veterinarian).
 - d. Completed Roommate ESA Agreement form- if applicable.
 - e. A typed personal statement identifying the rationale for requesting an ESA. The statement should include specific information about how the student's documented condition is improved by the presence of an ESA. The written statement should not exceed 500 words.
 - f. Record of appropriate county license.
- 3. The Coordinator of the Accessibility Services Office will review the completed file once all information has been submitted.
 - i. Requests are reviewed periodically throughout the academic year.
- 4. The requesting student will be notified of a decision through their OWU student email once requests have been reviewed.

If a roommate(s) object to sharing their room with an ESA, a roommate or the ESA owner may be asked to move to a different room. Such decisions will be made on a case-by-case basis and in a way so as to not discriminate against the individual with a disability.

Owner's Responsibilities

- ESA's must be at least 6 months old before coming to campus.
- All essential vaccinations and annual examinations must be completed.
- The ESA must be spayed or neutered prior to coming yo campus
- ESAs must be housebroken or litter box trained.
- Dangerous, poisonous, and illegal animals are not permitted.
- The student must comply with all state laws and local animal ordinances, as well as all University and Student Housing Operations & Planning, and Residential Communities policies and guidelines.
- The student is solely responsible for the care and supervision of the ESA, Residential Life assumes no responsibility for the care of a resident's ESA.

- Assure that the ESA does not unduly interfere or adversely affect the routine activities of other residents and neighbors, to the greatest extent possible.
- Assure the behavior, noise, odor, and waste of an ESA must not exceed reasonable standards and these factors must not create an unreasonable disruption for residents and Residential Life staff. Disruptive behavior includes loud barking, growling, howling, crying, etc. A nuisance is defined as, but not limited to, excessive noise, physical harm to humans or other animals, foul odors, and destruction of property.
- Cleanup and dispose of waste. Animal waste should be immediately retrieved by the owner, placed in a plastic bag, and securely tied before being disposed of in outside trash dumpsters. No ESA waste may be disposed of in any interior trash receptacles, sinks, toilets, or drains. The owner should keep the animal from urinating or defecating in gardens or cultivated areas of the campus. ESA accidents within the room must be promptly cleaned up using appropriate cleaning materials. Regular and routine cleaning of floors, kennels, cages and litter boxes is required. The odor of an ESA may not emanate from the owner's room.
- The ESA must be housed in the room at all times, except as required for transportation off campus or to eliminate waste. The animal must be crated when the student is not in the room.
 Residential Life and Buildings and Grounds are not responsible for the animal escaping from the room if it was not crated and staff need to enter the space. University staff will make all efforts to notify students when they need to enter a student residence, but this cannot always be guaranteed.
- While outside the owner's residence, or while being transported, the animal must be in an animal carrier or controlled by a leash or harness. The animal may not be left alone overnight or in the care of another student.
- Take appropriate precautions to prevent injury and/or property damage and assume financially responsible for the actions of the ESA, including bodily harm and property damage.
- The owner must ensure that the ESA does not sniff people or the personal belongings of others, display any behaviors or noises that are disruptive to others, or block an aisle or passageway for fire exits.
- Provide the Accessibility Services Office with emergency contact information for an individual should the owner be unable to care for the ESA at any time. A current OWU student or OWU personnel cannot be the emergency contact person.

ESA Health and Well-Being

- Collars and identification tags for dogs/cats must be worn at all times. It is recommended that the ESA wear some type of commonly recognized identification symbol that identifies the animal as an ESA, but not disclosing the owner's disability.
- The student must provide appropriate food, water, and shelter for ESA and keep the animal and its shelter clean and free of odors.
- The ESA should respond to voice or hand commands at all times, and the owner should maintain full control over the ESA.
- Owners are strongly encouraged to have an established relationship with the ESA for at least six (6) months prior to bringing the ESA to campus.

- Routine maintenance of the ESA is required. For dogs, this includes flea and tick prevention and de-worming.
- Accessibility Services/Residence Life has the right to request updated veterinary verification annually, or at any time during the ESA's residency.
- The student must not allow ESA to be neglected or abused. If any animal neglect is suspected, Residential Life will contact the student, Public Safety, and the Humane Society. In some circumstances, Residential Life may allow an ESA control officer or humane society representative to enter the student's room/apartment and remove the ESA if, in the University's judgment, the student has: abandoned the ESA; left the ESA in the room for an extended period of time without food or water; or failed to care for a sick ESA.
- The student must not leave the ESA unattended in a room or apartment overnight, or for an
 extended period of time beyond normal work/class hours. Should this occur, Residential Life
 will attempt to contact the student or emergency contact to remove the ESA. If this is not
 successful, the local animal service agency will be contacted to have the animal removed. All
 costs associated with removing the ESA shall be the responsibility of the student.

Residential Life Restrictions and Policies

- ESAs will be permitted in university housing only if the student receives prior written authorization from the Accessibility Services Office.
- ESAs are limited to the residential space (room) of the owner except when exiting or entering the residential building.
- ESAs are not permitted in the common living area within the residential space.
- ESAs must be crated when the student-owner is not in the room.
- ESAs may not be taken into bathrooms, laundry facilities, indoor recreational rooms, lounges, hallways, computer labs, study rooms, or other areas of the residential facility.
- ESAs cannot be taken into classrooms, dining halls, or other buildings on campus.
- ESAs must be leashed and in control at all times when traveling campus grounds.
- In an emergency evacuation of the building, if possible, the ESA should be on a leash or caged when exiting from the building.
- The Residential Life staff will inspect residential facilities on a regular basis as a part of routine health and safety checks of all residential space. If fleas, ticks, or other pests are detected the unit will be treated using fumigation methods by the university approved pest control services. Those costs will be billed to the resident's account. The owner must report known infestations to Residential Life staff, who will coordinate extermination with OWU's custodial service provider at the owner's expense.
- The Residential Life Office will inform Buildings and Grounds where ESAs reside. When routine maintenance is necessary, the Residential Life Office will make every effort to coordinate the schedule in advance so that the owner can be present.
- When an owner requests repairs for the room and is absent from a room, the owner must ensure the animal is crated and/or may find alternative off campus space for the animal during the repair process.

- Disability Services/Residence Life reserves the right to make reasonable changes to the ESA agreement. If such changes are made, Disability Services will distribute a written copy of any changes to every resident who has a current ESA agreement on file.
- ESAs may be limited in size with regard to the residential room availability. The student will not be granted a larger space to accommodate the ESA and all pertinent items required for the health and safety of the animal and the OWU community.

Removal of an ESA

- ESAs may be removed from Ohio Wesleyan University premises under the following circumstances. The Accessibility Services Office is available to students with disabilities even when there is a legitimate reason to ask an ESA be removed from university housing.
- The ESA is not housebroken.
- The ESA is out of control and the owner does not take effective action to control it. If improper animal behavior occurs repeatedly, the owner may be prohibited from keeping the ESA in university housing until the owner can demonstrate that he/she has taken significant steps to mitigate the behavior.
- The ESA is not an approved animal by local ordinances.
- The ESA demonstrates a direct threat. An owner may be directed to remove an ESA that Ohio
 Wesleyan University determines to be a substantial and direct threat to the health and safety of
 individuals. Any ESA that displays vicious behaviors toward other students, staff, or guests, may
 be barred from campus.
- ESAs which constitute a threat (perceived or otherwise) or nuisance to staff, residents, or property, as determined by the Accessibility Services Office in collaboration with Residential Life Office must be removed from campus.



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Emotional Support Animal Request

TO BE COMPLETED BY THE STUDENT (Please type or print legibly): Student Name: _____Student ID Number: _____Student ID Number: _____ Permanent Address: Campus Address (Residence): ______ Email Address: _____ Phone Number: _____ _____Animal's Name: ______ Breed: ______ Age: _____ Size of Animal (in pounds): _____ Sex of Animal: Male _____ Female _____ Yes No Microchipped: Yes No Spayed/Neutered: ALTERNATE CAREGIVER for the ESA if the student is not available: Relationship to Student: _____ Phone Number: _____ EMERGENCY CONTACT (this person will be contacted in the event that the student is injured or otherwise unable to care for the animal; this person cannot be an OWU student or staff member) Relationship to Student: ______ Phone Number: Veterinarian Verification Form is attached Yes_____ No____ By signing this document, I recognize, understand, and agree to all of the terms of the Ohio Wesleyan University Emotional Support Animal policy. Student Signature: ______ Date: ______



FAX: 740-368-3499 EMAIL: aso@owu.edu

Emotional Support Animal Request

Dear Health Care Provider:

Thank you for your assistance.

Your patient, named below, is a student at Ohio Wesleyan University and is requesting consideration for an Emotional Support Animal (ESA) accommodation. The student indicates that you have suggested that having an (ESA) in the residential facility will be helpful in alleviating one or more of the identified symptoms or effects of the student's disability.

OWU has a pet policy that does not permit the types of animals on campus that are typically prescribed as ESAs. As such, for a student to obtain permission to bring and retain an ESA on campus, he/she/they must provide clear and substantiated evidence of a disability which requires the presence of an ESA within the living environment. Requests are reviewed in accordance with the guidelines set by the Department of Housing and Urban Development (HUD) and the Fair Housing Act (FHA).

As a part of the ESA request review process, the University requires supporting documentation from an appropriately licensed mental health care provider that has diagnosed and/or is currently treating the student. If the student mental health care provider cannot complete the form, the student's family health care provider may complete the form. However the student will be required to submit a Supplemental letter of acknowledgement from a mental health care provider regarding the support of an ESA.

Your answers to the questions on this form should provide an identifiable and documented link between the disability and the assistance that the animal provides. We recognize that having an ESA in the residence hall can be a real benefit for someone with a significant mental health disorder, but the practical limitations of our housing arrangements make it necessary to carefully consider the impact of the request for an ESA on both the student and the campus community. If approved, the student may retain **one** ESA.

Please complete this form entirely; do not substitute attached records for responses on this form or simply note that the information is contained in attachments.

TO BE COMPLETED BY THE STUDENT:				
Student Name (Printed):	Date of Birth:			
Type of Animal:	Animal's Name:			
Campus Residence:	Animal's Age:			
Authorization to release information: I, the above named student, authorize my health care provider to supply Ohio Wesleyan University with any information in my records pertinent to my request for an Emotional Support Animal, including but not limited to, information requested on this form. I agree that information provided in conjunction with this request may be reviewed as necessary by appropriate Ohio Wesleyan University staff to determine the response.				
Student Signature:	Date:			

TO BE COMPLETED BY THE HEALTH CARE PROVIDER:

So that we may better evaluate the request for this accommodation, please answer the following questions

t):

(please type, print legibly, or provide typed answers separately if the space provided is not sufficient):				
Inform	ation about the Student's Disability			
(A person with a disability is defined as someone who has "a physical or mental impairment that substantially limits one or more major life activities.")				
1.	Is the student currently under your care?	□Yes	□No	
2.	Does the student require ongoing treatment? ☐ Yes	□No		
3.	How long have you been working with the student regarding the	is mental health	diagnosis?	
4.	4. What is the nature of the student's mental health impairment? How is the student substantially limited?			
Information about the Proposed ESA				
5.	5. Is this an animal that you specifically prescribed as part of treatment for the student, or is it a pet that you believe will have a beneficial effect for the student while in residence on campus?			
6.	What symptoms will be reduced by having the ESA?			

7. Is there evidence that an ESA has helped this student in the past or currently?

Importance of an ESA to Student's Well-Being

8.	In your opinion, how important is it for the student's well-being that the ESA be in residence on campus? What consequences, in terms of disability symptomology, may result if the accommodation is not approved?			
9.	Have you discussed the responsibilities associated with properly caring for an animal while engaged in typical college activities and residing in campus housing? Do you believe those responsibilities might exacerbate the student's symptoms in any way? (If you have not had this conversation with the student, we will discuss with the student at a later date.)			
	certify that my relationship with the student is as a health care provider, and I have er non- professional relationship with this student.			
Please include a signed copy of official letterhead along with this application.				
Health Care Provider Name:				
Health	Care Provider Signature:			
License	e #:Date:			
In the	space provided below, please provide the following:			
Office Address, Phone, and Fax Number (Stamp or write below):				



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Emotional Support Animal Request Veterinarian Verification Form

PLEASE COMPLETE THE FOLLOWING INFORMATION: (Please type or print legibly):

Veterinarian Name and/or Clinic Name:				
Address:				
City, State, Zip Code:				
Phone Number: Fax Number:				
EMOTIONAL SUPPORT ANIMAL INFORMATION:				
Owner/Student Name:				
Animal's Name: Type of Animal:				
Breed:Color:Age:				
Size of Animal (in pounds): Sex of Animal: MaleFemale				
Spayed/Neutered:				
Please check all that apply: Canine Vaccinations: DHLPP + C (Distemper, Hepatitis, Leptospirosis, Parvovirus, Parainfluenza, Corona): Yes No Bordetella: Yes No				
Rabies: Yes No Feline Vaccinations: FVRCP (Panleukopenia, Rhinotracheitis, Calicivirus, Chlamydia): Yes No FeLV (Feline Leukemia): Yes No Rabies: Yes No				
Other (please specify):				
By signing this document, I verify that the above mentioned animal has all current vaccinations as required, and that all of the above vaccinations will remain current through one year. I verify that the above mentioned animal is in general good health.				
Veterinarian's Signature: Date:				
State License Number or Professional Certification Information:				



Emotional Support Animal Request

Accessibility Services Office 316 Corns Hall Delaware, Ohio 43015 PHONE: 740-368-3990 FAX: 740-368-3499

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Roommate Agreement Form

PLEASE COMPLETE THE FOLLOWING INFORMATION: (Please type or print legibly):		
Student/ESA Owner Name:		
Roommate/Suitemate Name(s):		
Residence Hall and Room Number:		
My signature below indicates that I am aware of the request to share the conspace with my roommate's/suitemate's Emotional Support Animal (ESA). Sho and control of the approved ESA, I will discuss my concerns with the ESA studies staff, if the student-owner of the ESA and I cannot come to an agreement	ould I have any concerns regarding the care dent-owner and then with the Residential	
I am aware that the ESA is working with its student-owner, and I understand etiquette:	that I should observe the following	
 I should avoid touching the ESA without permission. I should not make noises at the ESA that may distract the anim I should not feed the ESA as it may disrupt its schedule. I should not attempt to startle the ESA. I should not attempt to separate the ESA from its student-owner. I should refrain from asking the student-owner questions related the ESA provides. I understand that the student-owner is not on the information is personal, and in many cases is protected information want to be defined by diagnostic or disabling factors. I record to talk about personal matters, including diagnoses. I should rethe student-owner's disability or accommodations. If the student-owner shares medical or disability-related information as I would any personal information shared in continued-to-know basis (e.g. if professional attention or intervention. I understand that I am not responsible for the care and upkeep absence (unless I am designated as the alternate caregiver on the should be a sh	er. ed to their disability or the assistance that bliged to disclose their specific situation, as ormation. I understand that many people do agnize that partners with ESAs may not want frain from gossip or speculation related to mation with me, I should treat the fidence with me and will only share it on a con is warranted.)	
Roommate/Suitemate Signature:	Date:	
Roommate/Suitemate Signature:	Date:	
Roommate/Suitemate Signature:	Date:	