SMITH COUNTY PUBLIC SCHOOLS SERVICE ANIMAL REGISTRATION/AGREEMENT

Owner of animal

Student or Staff member receiving assistance from animal		
Type of Service Animal: Dog Name of Dog		
This animal is required because of a disability. \Box Yes \Box No		
What work or task is the enimal trained to perform?		
What work or task is the animal trained to perform?		

I have read and understand the School District's Service Animals procedure. I will abide by the terms of this procedure.

I understand that if my Service Animal is: out of control and/or the animal's handler does not effectively control the animal's behavior; not housebroken or the animal's presence or behavior fundamentally interferes in the functions of the School District; or, poses a direct threat to the health or safety of others that cannot be eliminated by reasonable modifications, the School District has the discretion to exclude or remove my Service Animal from its property.

I agree to be responsible for any and all damage to School District property, personal property, and any injuries to individuals caused by my Service Animal. I agree to indemnify, defend and hold harmless Smith County Board of Education from and against any and all claims, actions, suits, judgments and demands brought by any party arising on account of, or in connection with, any activity of or damage caused by my Service Animal.

Signature: Service Animal Owner/Parent or Guardian

Date: _____

Date:

Signature: School Principal

Note: This Registration/Agreement is valid until the end of the current school year. It must be renewed prior to the start of each subsequent school year, whenever the student changes schools or the employee changes his/her place of assignment, or when the individual accompanied by the service animal desires to use a different service animal.

SMITH COUNTY PUBLIC SCHOOLS SERVICE ANIMAL ACCESS REQUEST CHECKLIST

School:	
Student:	Date:
Is the animal a trained Service	Animal (hearing, seizure alert, mobility, autism, etc.) <u>YES</u> NO
Owner's Name:	Handler's Name:
Owner's Address:	
Handler's Address:	
Owner's Phone:	Handler's Phone:
The handler has had a backgrou	and check and is qualified to be on school grounds?YESNO
Type of Service:	Type of Animal:
retrieving objects, carrying objects, diabetes, balance/mobility, prev) or function(s) that mitigate the student's disability? (hearing, guiding, ects, pulling a wheelchair, opening doors, seizure alert, allergen alert, venting behaviors)
Could the student's needs be m	et by an adult in the school system? <u>YES</u> NO
Explain why the student's need	s could not be met by an adult in the school system.
Does the animal and its primary	handler have proof of training?YESNO
Does the animal have a current h	ealth certificate?YESNO
Dog does not urin Dog does not solid Dog does not voca Dog shows no agg	hal (Check all that apply): -groomed and does not have an offensive odor; ate or defecate in inappropriate locations; cit attention, visit or annoy any member of the general public; alize unnecessarily, i.e., barking, growling or whining; gression towards people or other animals; and cit or steal food or other items from the general public