

## **Service and Assistance Animal Registration Form**

Students planning to bring their Service or Assistance Animal to reside in University housing are required to follow the procedures outlined in [Service and Assistance Animal Guidelines and Procedures](#).

Deadlines: Students must submit the Service and Assistance Animal Registration Form and disability documentation in accordance with the housing deadlines appropriate for their school and class standing, outlined below:

- Columbia College and Columbia Undergraduate Engineering:
  - Incoming first year Columbia College and Columbia Engineering students: May 1st for the Fall semester and November 1st for the Spring semester
  - New Columbia Engineering Combined-plan Transfer students: June 30th for the Fall semester and November 1st for Spring semester.
  - All other Columbia College and Columbia Engineering students: February 1st for the following Fall semester and November 1st for the Spring semester
- General Studies and Morningside Graduate Students:
  - June 1st for Fall semester
  - November 1st for Spring semester
- Columbia University Medical Center:
  - Entering first year P&S medical students: April 1st
  - Entering ETP Nursing students: March 1st
  - All other entering first year students: May 1st
  - Couples Housing: May 1st

Owner's Name: \_\_\_\_\_ Owner's UNI: \_\_\_\_\_

Owner's Phone: \_\_\_\_\_

Owner's School and Current Standing: \_\_\_\_\_

**Questions 1-3 pertain to Service Animals. Questions 4 and 5 pertain to Assistance Animals. Questions 6-12 pertain to both Service and Assistance Animals.**

### **Service Animals Only:**

1. My Service Animal is a:      Dog                      Miniature Horse
  
2. My Service Animal is required because of my disability                      YES                      NO

3. List tasks/work your Service Animal is trained to perform:

a. Task: \_\_\_\_\_

b. Task: \_\_\_\_\_

**Assistance Animals Only:**

4. My animal is an Assistance Animal YES NO

5. Indicate the symptoms of your disability, the assistance that your animal provides to mitigate those symptoms and why the animal is necessary for you to use and enjoy your residence: \_\_\_\_\_

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**Both Service and Assistance Animals:**

6. Date you wish to bring your Service or Assistance Animal to campus: \_\_\_\_\_

7. Do you already live in Columbia Housing? YES NO

a. If yes, please provide location/address: \_\_\_\_\_  
\_\_\_\_\_

b. If no, please indicate your move-in date: \_\_\_\_\_

8. Please indicate whether you currently live or will live with roommates or suitemates in Columbia Housing? YES NO

9. Do you already own the animal? YES NO

If No indicate date when you will obtain animal: \_\_\_\_\_

**10. Type of Animal:**

a. Dog

b. Miniature Horse

c. Cat

d. Rabbit

e. Other: \_\_\_\_\_

**11. Breed of animal (if applicable)** \_\_\_\_\_

**12. Weight of animal (approximate)** \_\_\_\_\_

**13. Physical Description of Animal (coat color):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**14. Name of Animal:** \_\_\_\_\_

**15. Please also insert a photo of the animal below or attach separately.**

**16. Submit animal health records, including verification that the animal has all veterinary-recommended vaccinations to maintain good health and prevent contagious disease, including current rabies vaccinations for dogs and cats.**

**17. Animal Emergency Contact (AEC) (must be an individual over the age of 18 who MAY NOT live in University Housing, and can pick up the animal within eight hours of contact by University staff, or a licensed veterinarian, shelter or boarding facility where the student has established an account).**

a. AEC Name: \_\_\_\_\_

b. AEC Street Address:  
\_\_\_\_\_

c. AEC Phone Number: \_\_\_\_\_

d. AEC Email Address: \_\_\_\_\_

e. Is this AEC a business?

YES    NO

i. If yes, please indicate by initialing below that you have established an account with this business for the care of your animal: \_\_\_\_\_

**18. By your signature below, you certify that the above information is true and correct to the best of your knowledge:**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_