This document sets forth the responsibilities of an Owner and the University when a service or assistance animal is approved to reside in a University-owned or controlled residential facility. The “Owner” of a service or assistance animal as referred to herein is a student approved to have the animal in residence or an approved assistant to the Owner.

Important Information:

- The University supports service animals on campus wherever it is deemed safe and reasonable.
- The University requires that assistance animals reside only in the Owner’s residence, and, when outside on campus, only where safe and reasonable.
- The University is not required to house a service or assistance animal if the Owner:
  (a) has not completed all necessary documentation
  (b) is not pre-approved by Disability Services
  (c) violates University policy, local, state or federal law.
- It is strongly encouraged, if living in University-owned housing, that the Owner obtain Renter’s Insurance.
- In accordance with local ordinances and regulations, service/assistance animals will possess all required and recommended immunizations. Dogs must have a current rabies vaccination and wear a rabies vaccination tag. Cats should have the normal shots required for a healthy animal. Other animals may require other immunizations, and will be considered on a case-by-case basis.
- The roommate(s) of the Owner must sign an agreement acknowledging that the animal will be living in the room/suite/apartment. In the event that the roommate(s) chooses not to live with the Owner and their animal, the roommate may request to the Area Coordinator to be relocated.
- Animals must not be disruptive to other students. The Owner shall not allow the animal to sniff persons, their personal belongings, or tables in eating areas. The Owner shall further not allow the animal to initiate contact with persons or other animals without the Owner’s direct permission, or to display disruptive or aggressive behaviors or noises.
- This agreement is applicable to the single academic year and to the specific animal described on page 5 of this contract in which the approval is made. A new request must be filed before housing selection, each year.
- Any necessary documentation required by this agreement must be provided by the Owner immediately upon request, and it is the Owner’s responsibility to keep the documentation and immunization records up to date.
- The Owner will be assigned a liaison within the Office of Housing & Community Life. The liaison will assist the Owner with any questions the Owner has related to their animal in residence as well as coordinating any moves from one location to another, arranging for staff notifications and trainings and assisting with re-introduction of the Owner and animal to a new community, if necessary. If the Owner moves to a different area of campus during the academic year, they may be assigned a new
liaison. The University liaison will check in with the Owner on a regular basis to answer any questions and ensure that their animal’s needs are being met.

- Reasonable accommodation, which in this case may constitute an exception to a policy that would otherwise prohibit having an animal, does not constitute an exception to any other University policy.

Owner Responsibilities:

_____ The Owner is responsible for reviewing this contract (pages 1-5) and obtaining the required documentation from their licensed professional with expertise in the identified disability or medical condition who shall complete page 6 of this document.

_____ The Owner is responsible for the actions and conduct of the animal.

_____ The University will inspect and clean the assigned space when an Owner and/or animal vacate the room/suite/apartment. The Owner is financially responsible for property damage caused by the animal and for maintenance, cleaning and fumigation necessitated by the presence of the animal. This includes, but is not limited to, replacement of furniture, carpet, windows, window coverings, wall coverings.

_____ The Owner’s student account will be billed applicable maintenance, fumigation and cleaning charges.

_____ The Owner must crate or cage the animal in an appropriate enclosure if the Owner is not present in their room/suite/apartment.

_____ The Owner agrees the animal may not to be cared for by another student during periods of extended absence. Owners must take the animal if they leave campus overnight, or for a prolonged period (e.g., weekends, holidays, etc.).

_____ The Owner agrees to keep required immunizations up to date and to provide proof of the immunizations to Disability Services.

_____ The University reserves the right to require the Owner to obtain veterinary care for the animal in order to continue in residence whenever the University deems it appropriate to do so.

_____ The University requires the Owner to provide documentation from the licensed Veterinarian listed on page 5, which includes a vaccination certificate for the animal, along with the veterinarian’s statement certifying that the animal is in good health and is suitable for the Owner’s campus living environment.

_____ The University requires that animals wear appropriate tags at all times consisting of vaccination tags, licenses, and Owner contact information.

_____ The Owner is required to maintain control of the animal at all times and is responsible for ensuring the safety and well-being of the animal and the Willamette community.

_____ The Owner agrees that the animal will be on a leash, harness, or inside a carrier device at all times unless the leash, harness or carrier would inhibit the animal’s ability to be of service.
The Owner is responsible for ensuring the prompt cleanup and appropriate disposal of the animal's waste.

The Owner agrees that a service or assistance animal may be excluded from campus if the animal is not housebroken.

The Owner agrees that, when appropriate, the animal must be toileted in areas designated by the University, consistent with the Owner’s reasonable capacity to perform this task.

The Owner agrees that indoor animal waste, such as cat litter, must be placed in a sturdy plastic bag and securely tied up before being disposed of in a dumpster. **No waste is to be disposed of in any trash receptacle inside any building, or through any sewer system inside each building (sinks and toilets). Outside dumpsters must be used.**

The Owner’s residence may be inspected by Residential Services or their designee for fleas, ticks or other pests at least once a semester, or as needed. If fleas, ticks or other pests are detected, the residence will be treated by the University’s pest control contractor. The Owner is responsible for the cost of eliminating any pest infestation caused by their animal.

The Owner agrees to notify their University liaison within 2 working days if their animal is no longer in residence.

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**WILLAMETTE UNIVERSITY**

I, the undersigned student, (or the undersigned guarantor if the student is under age 18) accept all liability for damages to person or property caused by or arising from the animal’s actions while present on property owned or controlled by the University. I further agree to indemnify and hold harmless Willamette University from all expenses, injuries or claims arising out of the animal’s actions while on property owned or controlled by Willamette University. Consistent with federal and state law, I understand that the University may exclude or remove a service/assistance animal if the animal’s behavior or presence poses a direct threat to the health or safety of others.

Any violation of this contract may result in a violation of the Standards of Conduct.

I have read and agree to the terms of Willamette University’s *Service and Assistance Animal Owner Responsibilities in Campus Residences*. I acknowledge that if I have questions or need assistance that I will contact my Housing & Community Life liaison.

Owner’s Name (please print): ___________________________________________  ID: ________________

Owner’s Signature: ____________________________________________________  Date: ________________

Guarantor’s Signature: _________________________________________________  Date: ________________

(If student is under 18)

*Revised: 7/30/2015*
Disability Services
Request for Accommodation of Service or Assistance Animal

Verification of the need for the accommodation or adjustment requires clinical support provided by the Licensed Professional with expertise in the identified disability or medical condition who completes page 6.

Section 1: To Be Completed By Applicant
Name: ___________________________ ID: ___________________________
Current Address: ___________________________________________________  
City: ___________________________ State: ______ Zip Code: _____________
Phone: __________________________

Do You Currently Live on Campus?YES NO
Campus Address (If different than above) __________________________

Do you intend to live on campus? YES NO

Have you submitted a Housing Application? YES NO

Check all that apply: I have a medical condition_____ I have a disability_____

Part I
To be completed by applicant

A. State Your Request:

B. Please explain how your request lessens or eliminates the adverse effects of your disability or medical condition (Attach a separate typed sheet, if necessary):

Signature of Applicant: __________________________________ Date: ______________

This signature authorizes the verifier to provide answers to the questions in Part III (page 6).
Part II: Service/Assistance Animal Registration and Agreement

All service/assistance animals that enter residential buildings owned by Willamette University must be registered with the Disability Services Coordinator. Registration is valid for the academic year, and must be updated with current animal information at the beginning of each contract term. Proper registration requires verification of licensing (if applicable) and vaccination for the service/assistance animal. Proper identification is also required.

Please Print:
Owner Name: ___________________________ WU ID #: __________________
Campus Address: ___________________________ Phone Number: _______________

Service/Assistance Animal Information:
Name of Animal: ______________________________________________
Type of Animal: ______________ Breed: _________________
Description of Animal (include Colors/Markings): ______________________________________________
Name of Veterinarian: ___________________________ Phone Number: ___________________________
License Tag Number (If Applicable): ___________________________ Year: _______________
Vaccination Schedule: Last date vaccinated: ___________________________ Next immunization due by: ___________________________
Spayed or Neutered (Please provide appropriate documentation): _______________

Has the service/assistance animal ever bitten or shown aggressive behavior towards people? If yes, please explain the circumstances.
_____________________________________________________________________________________
_____________________________________________________________________________________

The primary purpose of this animal is (Check ONE):
Service Animal: ________ Assistance Animal: _________

For Service Animals only:
What disability-related service is the service animal trained to do?

Service/Assistance Animal Agreement
Any student who is currently living on campus or intends to live on campus must agree to abide by the policies and responsibilities regarding service/assistance animals. All applicants must attach a current Veterinarian’s statement regarding the service/assistance animal’s health and verification that the animal has all Veterinary-recommended vaccinations to maintain its health and prevent contagious disease.

By Signing below, the applicant verifies that they have read the University’s Service and Assistance Animal policy and the Owner’s Responsibilities in Campus Residences and is aware of the potential consequences of violating these Responsibilities.

_________________________________ ___________________
Applicant/Owner Signature Date
Part III:
To be completed by Verifier

Clinical evidence to support the request must be provided by a Licensed Professional with expertise in the identified disability or medical condition.
Considering the legal definition of disability, including the Fair Housing Act, the Americans with Disabilities Act, and 504 of the Rehabilitation Act of 1973, does this student have a disability?

YES_____ NO_____

The determination whether a requested accommodation is reasonable is to be made by Willamette University and does not concern the Verifier.

In your opinion, is the request described on Page 4, Part I of this application necessary in order for this student to live on campus while attending Willamette University?

YES_____ NO_____

Have you discussed with the applicant how they plan to manage the overall caretaking responsibilities associated with having an animal in residence in addition to their academic endeavors?

YES_____ NO_____

Describe how this accommodation or adjustment will lessen or eliminate the adverse effects of the disability or medical condition. (If attaching a statement, it should be on letterhead or professional stationery).

Verifier
Name (Please Print): ____________________ Position/Title: ___________________________________
Professional Address: ____________________________________________________________________

Phone: _______________________________________________________________________________
Signature of Verifier: ___________________________ Date: __________________________