Service Provider Form for Students Requesting Emotional Support Animals

Section I: Student Information:

Student Name: Last: First: Middle:

Date of Birth: Student/Tech ID:

Home Address:

City State Zip

Phone: Email:

Section II: Authorization to Disclose Health/Diagnostic Information

I, the above named student, do authorize:

- Minnesota State Community and Technical College Accessibility Resources to receive information from the service provider listed below.
- My service provider to discuss my file with Accessibility Resources representative.
- The Accessibility Resources Staff to discuss my file with the Residential Life staff as needed.

Name of Provider:

Address (Street, City, State, Zip):

Student Signature: Date:

Section III: Notes regarding ESA requests:

ESAs may not be brought to the residence hall until official approval has been given from the Accessibility Services Office. Please submit all necessary information with enough lead time to allow the office to fully consider your request.

The health care provider need not use this specific form, but all the information requested here is necessary for the institution to have in order to consider the request for an ESA; the form is provided as a convenience.

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Generally, we prefer documentation from providers in the State of Minnesota or the student's home state who have personal knowledge of the student, consistent with their professional obligations.

Some websites sell certificates, registrations, and licensing documents for assistance animals to anyone who answers certain questions or participates in a short interview and pays a fee. Under the Fair Housing Act, a housing provider may request reliable documentation when an individual requesting a reasonable accommodation has a disability and disability-related need for an accommodation that are not obvious or otherwise known. **In HUD's experience, such documentation from the internet is not, by itself, sufficient to reliably establish that an individual has a non- observable disability or disability-related need for an assistance animal.** *(Excerpt from 2020 HUD Guidance)*

Section IV: Health Information (Completed by the Service Provider)

Information About the Student's Disability

Federal law defines a person with a disability as someone who has a physical or mental impairment that **substantially limits** one or more major life activities. That suggests that a diagnosis (label) does not necessarily equate with a disability (substantial limitation). What is the nature of the student's mental health impairment (that is, how is the student **substantially limited**?)

Documentation of disability must come from a source with sufficient direct personal knowledge of the individual to clarify the need for the ESA and the nexus between the disability and the presence of the animal in housing.

When did you first meet with the student regarding this mental health diagnosis?

What is the nature of your meetings (i.e., face-to-face meetings or virtual interaction)?

When did you last interact with the student regarding this mental health diagnosis?

How often have you seen the student (or plan to see the student) for further counseling/treatment?

What specific symptoms is this student experiencing, and how will those symptoms be mitigated by the presence of the ESA? General assessments are typically insufficient. For example, a statement that “The animal alleviates anxiety” is too general and does not explain HOW the animal may alleviate the symptoms of this student’s disability.

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Information About the Proposed ESA

Note: there are some restrictions on the kind of animal that can be approved for the residence hall; it is possible the student may be approved for an ESA, based on the information you provide here, but may not be allowed to bring the specific animal named.

Name of Animal:

Type of animal:

Age of animal:

Size of the cage/crate needed for containment:

Dogs and cats are most often requested as ESAs, and seem best suited to adapting to the communal living setting of the college residence hall. If another type of animal is being suggested for this student, please explain why you believe that animal is a better choice.

Is the animal named here one that you specifically recommended 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?

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Is there evidence that an ESA has helped this student in the past or currently? If not, why do you believe this may be an effective support for the student now?

In your opinion, how important is it for the student's well-being that an ESA be in residence on campus? What consequences, in terms of disability symptomology, may result if the accommodation is not approved?

Please address the likely impact on the student should the following scenario occur: once the student is living with the animal in the student housing unit, the animal is permanently removed from the unit because of a violation of policy (e.g. the animal injures someone or destroys property) and balance this impact, if any, against the benefit that you expect the animal to provide to the student.

This student was provided with a copy of the policies surrounding the presence of an animal in residence in on campus housing. Has the student shared those policies with you? Yes___ No

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.)

Please provide contact information, sign and date this questionnaire (below), and return it to:

Minnesota State Community and Technical College
Accessibility Resources
1900 28th Ave S
Moorhead, MN 56560

PH: 218.299.6882
FAX: 218.299.6869
Email: arteam@minnesota.edu

Professional Signature:

Type of License:

License # (and State of licensure):

Date:

Name/Title:
Address:
Phone/Direct Contact