

Request for Emotional Support Animal (ESA) Information

When completing the questions in the chart below, please note that if the ESA has not already been identified you may indicate under the "Type of Animal" and "Age of Animal" questions "To Be Determined."

	Student's Name:	
	Banner ID:	
	Type of Animal:	
	Age of Animal:	
	Date of Request:	
sug mo of l aco Stu (A lim	ggested that having an Emore of the identified sympt Missouri or the students' commodation, please thor adent Disability Informati Person with a disability is hits one or more major life	defined as someone who has "a physical or mental impairment that substantially
Do Γ	es the student require on	going treatment? If yes, please describe.
\ / /}	nen did vou first meet wit	h the student regarding this mental health diagnosis?

Request for Emotional Support Animal (ESA) Information (cont.)

Information About the Proposed ESA

Please note that 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.

Proposed ESA Information
Is the animal one that you specifically prescribed as part of treatment for the student? When did you first begin
discussing the ESA as part of the treatment plan?
Is it your belief that the animal will have a beneficial effect for the student while in residence on campus? Please explain why.
Please describe what symptoms will be reduced by having the ESA. How will those symptoms be reduced?
Is there evidence that an animal has served as a therapeutic tool for the student in the past or currently? Please explain.
Importance of Proposed ESA to Student's Well-Being
What consequences, in terms of disability symptomology, may result if the accommodation is not approved?

Request for Emotional Support Animal (ESA) Information (cont.)

	responsibilities associated with proper care for an animal while engaged in typical college campus housing? How could these responsibilities potentially exacerbate the student's			
symptoms:				
Thank you for taking the time to complete this form. Disability Services may contact you if any need for additional information is needed. We recognize that having an ESA in housing can have significant benefits for students with disabilities. The practical limitations of housing options and assignments make it necessary to carefully consider				
	t for an ESA on both the student and the campus community.			
Dlagga provide your cont	east information holow and return the completed form to the student. You may also			
forward the completed f	cact information below and return the completed form to the student. You may also form to Disability Services at disability_services@slu.edu or fax to 314.977.3486. Thank in supporting students requesting housing accommodations.			
Name and				
Credentials:				
License #:				
Address:				
Telephone:				
Email Address				
and/or FAX:				
•				
Professional Signature	e:			