

Verification of Disability, Emotional Support Animal Request

Marian University provides accommodations in university housing to students with disabilities who have a verifiable need for a reasonable accommodation. A reasonable accommodation may allow a resident to have an equal opportunity to use and enjoy university housing by reducing and eliminating residential barriers. Students whose request are specific to an Emotional Support Animal (ESA) must complete the interactive process with the Personalized Learning Center (PLC) which includes submission of the documentation as outlined. An Emotional Support Animal is not a pet. An Emotional Support Animal provides support that alleviates one or more identified disability-related impacts as documented by a qualified professional.

To make appropriate decision related to an ESA accommodation request, Marian University needs to review documentation that specifically addresses the following areas to determine if the request for this accommodation is reasonable and appropriate with regard to the university housing's no pet policy.

- Clear documentation of the student's disability.
- Verification that the animal is necessary to afford the student an equal opportunity to use and enjoy university housing.
- Demonstration of a direct relationship between the disability and the support the animal provides.

The information submitted to the PLC should reflect the most currently available information and must be completed by a licensed health care provider who is familiar with the student's disability, as well as the need for an ESA as it relates to the student's accessible housing request. The licensed health care professional completing this form should have provided care for a length of time to be able to determine if the presence of an animal could alleviate the impact of a student's disability in an environment such as a university residence hall.

Please note that non-specific form letters from online organizations and web-based "certifications" of support animals will not be considered as appropriate documentation.

Verification of Disability, Emotional Support Animal Request

Date: _____

Student Full Name: _____ DOB: _____

1. Professional's first date of contact with student: _____
2. Date of most recent contact with student: _____
3. Total number of appointments with student: _____
4. Nature of contacts: Phone/Skype vs. In-Person: _____
5. Please list the different disabilities and current severity of each, using a mild-severe rating system: (example: Major Depression- Mild)

6. How did you arrive at this diagnosis? Please check all that apply.

Clinical Interview (Structured or Unstructured)

Psychoeducational Evaluation (Dates of testing: _____)

Neuropsychological Testing (Dates of testing: _____)

Other- Please specify:

7. Describe in detail how this condition impacts the student's ability to utilize or enjoy university housing?

8. Does the student currently have an emotional support animal? _____

9. If so, how has the emotional support animal helped this student in the past or how will it help going forward?

10. If the use of an emotional support animal is a new approach to treatment, provide a date at which the effectiveness or ongoing need should be re-evaluated: _____

11. Please describe what disability symptoms will be reduced by having the ESA in their campus housing with them?

12. How would this student be impacted if the request for an emotional support animal was not approved?

Provider Information

By completing and signing this form, I certify that I conducted the diagnostic assessment of the student named above.

Name: _____

Title: _____

License # and expiration date: _____

Affiliation (Solo Practice or Group Name): _____

Address: _____

Telephone: _____

Fax: _____

Professional Signature: _____

Thank you for your assistance in completing this form. The staff at the Personalized Learning Center at Marian University may contact you if any additional information is needed. Please return the completed form via email or fax:

Personalized Learning Center

Marian University

Attn: Mandie Greiwe, Director

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Indianapolis, IN 46222

Fax: 317.955.6041

Email: PLC@marian.edu