



SERVICE or EMOTIONAL SUPPORT ANIMAL REQUEST FORM

Date of Request: _____

Student name: _____

NCC ID: _____ Phone Number: _____

Email: _____@spartan.northampton.edu

Address: _____

ANIMAL INFORMATION:

Animal's name: _____ Type of animal: _____

Breed: _____ Gender of animal: _____ Weight: _____

Physical description of animal: _____

- Current photograph of the animal attached to this document
- Copy of Veterinarian's verification that the animal has all required vaccinations following state and local regulations. For animals, other than cats and dogs, must have Veterinarian's written statement regarding the animal's good health
- For dogs only: Copy of current Dog License

INFORMED CONSENT FOR RELEASE OF INFORMATION:

This release regarding this information will remain in effect while you are a resident of College housing, or, inform Disability Service you no longer require this animal.

I, _____, understand this request form may be shared with the Office of Disability Services and the Office of Housing and Residence Life. I authorize Northampton Community College Offices of Disability Services and/or Housing and Residence Life to disclose to others that may be impacted by the presence of an animal. This includes College staff and potential and/or actual roommates if I will be living with an animal as an accommodation to the Housing Program. I understand this information will be shared with the intent of notifying for the presence of the animal and/or resolving any potential issues associated with the presence of the animal in College facilities. Furthermore, I understand that all other information regarding my request will be protected and kept confidential, except as otherwise required by law.

Signature: _____ Date: _____

Completed form must be returned by person, by fax, scan and email, or mail to:

Disability Services Office, CC341 Northampton Community College 3835 Green Pond Road
Bethlehem, PA 18020 FAX: 610-861-5351 email: disabilityservices@northampton.edu.