



Disability Services for Students

275 Eastland Road

Berea, Ohio 44017

www.bw.edu/DisabilityServices

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Emotional Support Animal (ESA) Verification Form for University Housing

Emotional Support Animals can play an important role in facilitating the independence and well-being of some individuals with certain types of disabilities. Therefore, in accordance with the Fair Housing Act, the University provides reasonable and appropriate accommodations for students with a documented disability and need for an Emotional Support Animal (ESA) in University housing.

Baldwin Wallace University recognizes that having an ESA in University Housing can be beneficial for someone with a significant mental health disorder, but the practical limitations of our housing arrangements make it necessary to carefully consider the impact of the request for an ESA on both the student and the campus community. Requests must be submitted each academic year and evaluated on a case-by-case basis, as outlined in the “Emotional Support Animal Policy, Procedures and Guidelines.” A person may qualify for this accommodation if:

1. The person has a documented, significant mental health condition;
2. The animal is necessary to afford the person with a disability full benefit and enjoyment of the residence halls; and
3. There is an identifiable relationship between the disability and the assistance the animal provides.

Baldwin Wallace University prohibits animals in University housing. BW will consider an exception from this prohibition if the request is reasonable and necessary because of a documented disability. ***However, no ESA may be kept in University housing until the student receives written approval from Disability Services for Students (DSS) as a reasonable accommodation under this Policy. Failure to abide by this will be considered a conduct violation. Judicial charges will be filed for violating the pet policy.***

Baldwin Wallace University reserves the right to amend the ESA Verification Form at any time as circumstances require.

Section I: Definitions

A. Emotional Support Animal

“Emotional Support Animals (ESAs)” are a category of animals that provide necessary emotional support to an individual with a mental or psychiatric disability that alleviates one or more identified symptoms of an individual’s disability, but which are not considered Service Animals under the ADA and BW’s Service Animal Policy. In most cases, ESAs provide the necessary support to individuals with mental health disabilities without any formal training or certifications. Dogs are commonly used as ESAs, but any animal may serve a person with a mental health disability.

The question in determining if an ESA will be allowed in University housing is whether or not the ESA is necessary, because of the student’s disability, to afford them an equal opportunity to use and enjoy University housing and its presence in University housing is reasonable. However, even if the individual with a disability establishes the necessity for an ESA and it is allowed in University housing, an ESA is not permitted in other areas of the University (e.g., dining facilities, libraries, academic buildings, athletic buildings and facilities, classrooms, labs, individual centers, etc.).

ESAs are not trained to assist individuals with disabilities in the activities of daily living and are therefore NOT considered Service Animals under the criteria established by the ADA and do not qualify for the same legal protection.

B. Pet

A “Pet” is an animal kept for ordinary use and companionship. A pet is not considered a Service Animal or an Emotional Support Animal. It is not covered by these guidelines. Residents are not permitted to keep pets on university property or in university housing, other than non-dangerous fish in an aquarium no larger than 20 gallons.

C. Approved Animal

An “Approved Animal” refers to an Emotional Support Animal that has been approved as a reasonable accommodation under these guidelines.

D. Owner

The “Owner” refers to the student who has requested the accommodation and had received approval to bring the ESA into University Housing.

E. Disability Services for Students

Disability Services for Students (“DSS”) collaborates with students, faculty and staff to ensure that students with documented disabilities have equal access to all BW programs, services and activities.

Section II: Information Regarding Emotional Support Animals in University Housing

- a. ESAs are restricted to the student’s immediate living space. They are not permitted in any shared, communal living spaces or other University spaces without the express written permission of DSS. Generally, only one animal is permitted in a residential unit.
- b. ESAs must be contained (caged or crated) when the student is not in the residence.
- c. ESAs may not be left in the care of other residents. If the Owner is to be absent from the residence hall overnight or longer, the ESA must accompany the Owner.
- d. The Owner is exclusively responsible for the ESAs behavior and/or any damage caused by the ESA. If the ESA is disruptive to the living environment for others (e.g. barking or other loud noises, significant odor from cages or litter boxes, etc.) or causes damage to University facilities, the University may require removal of the animal. If removal is necessary, the student will be given twenty-four (24) hours’ notice to remove the animal voluntarily. After which time the University may remove the animal to the nearest appropriate animal shelter.

Section III: Emotional Support Animal Documentation

Requests for an ESA in University Housing require reliable documentation of a disability to be submitted in order to review and render a decision. Baldwin Wallace University reserves the right to request additional information if the questions on the ESA Verification Form and ESA Application are not thoroughly answered. Documentation of the need for an ESA should include the following information:

- a. Verification of the individual’s disability from a qualified individual (physician, psychiatrist, social worker, or other mental health professional). The provider must include professional licensure/certificate information. Generally, documentation should be provided by a local provider or one near the student’s permanent address, suggesting an ongoing therapeutic relationship. Documentation provided by mental health providers on the basis of limited electronic or telephonic contact with students typically are insufficient to establish need.
- b. A statement regarding how the animal serves as an accommodation for the verified disability.
- c. A statement explaining how the need for the animal relates to the ability of the student to use and enjoy the living arrangements provided by the University.
- d. Current documentation (dated within the last six months) of items requested above.

Section IV: Responsibilities of Emotional Support Animal Owner in University Housing

Individuals who plan to have an ESA in University Housing are asked to make a formal notification at least sixty (60) days before move in, in accordance with the Baldwin Wallace University Policy, Procedures and Guidelines. Upon approval of an ESA, the Owner must complete and sign an ESA Contract before the ESA is permitted on campus. The Owner must agree to the following responsibilities:

1. The Owner must supply the name of a non-resident emergency contact to be responsible for the ESA if the Owner is incapacitated.

2. The Owner must abide by current city, county and state ordinances, laws and/or regulations pertaining to licensing, vaccination, and other requirements for animals. It is the Owner's responsibility to know and understand these ordinances, laws and regulations. The University has the right to require documentation of compliance with such ordinances, laws and regulations. The University reserves the right to request documentation of licensure and vaccinations.
3. The Owner must clean up after and properly dispose of the ESA's waste in outdoor waste receptacles and must use designated animal relief areas.
4. The Owner may not bathe the ESA in any University owned facilities.
5. The Owner may not launder any materials or bedding in any University owned facilities.
6. The Owner must ensure the animal is well cared for at all times. Any evidence of mistreatment or abuse may result in immediate removal of the ESA and/or discipline for the Owner.
7. The Owner's living accommodations may be inspected for fleas, ticks or other pests if necessary as part of the University's standard or routine inspections. If fleas, ticks or other pests are detected through inspection, the residence will be treated using approved fumigation methods by a University- approved pest control service. The Owner will be billed for the expense of any pest treatment above and beyond standard pest management in the residence halls. The University shall have the right to bill the Owner's account for unmet obligations under this provision.
8. The Owner must fully cooperate with University personnel with regard to meeting the terms of this Policy and developing procedures for care of the animal (e.g., cleaning, feeding and watering the animal; designating an outdoor relief area, disposing of feces, etc.).
9. The Owner may not leave the ESA overnight in University housing to be cared for by any individual other than the Owner. If the Owner is to be absent from the residence hall overnight or longer, the ESA must accompany the Owner.
10. The Owner must ensure the ESA is contained, as appropriate, when the Owner is not present during the day while attending classes or other activities. Containment will allow University staff to access the space for maintenance and other routine tasks without posing risk to the ESA. The Owner may also choose to post a sign alerting staff to the presence of the animal. This sign must follow University housing policies.
11. The Owner must abide by all equally applicable residential policies that are unrelated to the student's disability such as assuring that the ESA does not unduly interfere with the routine activities of the residence or cause difficulties for individuals who reside there.
12. The Owner may have the ESA in University housing only as long as it is necessary because of the Owner's disability. The Owner must notify DSS in writing if the ESA is no longer needed or is no longer in residence. To replace the ESA, the new animal must be approved as necessary because of the Owner's disability. The Owner must follow the procedures in this Policy to make a new request and receive written approval from DSS for the new ESA.
13. BW personnel will not be required to provide care or food for any ESA including but not limited to, removing the animal during emergency evacuation for events such as a fire alarm. Emergency personnel will determine whether to remove the animal and may not be held responsible for the care of, damage to, or loss of the animal.
14. The Owner must provide written consent for DSS to disclose information regarding the request for and presence of the ESA to those individuals who may be impacted by the presence of the ESA, including, but not limited to: Residence Life personnel and potential and/or actual roommate(s) or neighbors. Such information shall be limited and only related to the ESA and shall not include details related to the student's disability.
15. The Owner must fulfill all housing obligations for the remainder of the housing contract, should the ESA be removed from University housing for any reason.
16. The ESA is not permitted in to University housing until the Owner has been granted written approval from DSS and all Roommate Agreements have been signed, if applicable.

BW is not responsible for loss of, injury to, or death of an ESA.

BW reserves the right to inspect the cage or container of an ESA.



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STUDENT INFORMATION (Please Print)

Name (Last, First, Middle): _____ Date: _____

Date of Birth: _____ BW ID Number: _____

Status (check one): current student transfer student prospective student

Phone: (____) _____ - _____ BW Email: _____@bw.edu

Address (street, city, state, zip code): _____

Class Standing:

Freshman Sophomore Junior Senior Graduate Student

If not currently enrolled, specify expected start date:

Fall 20____ Spring 20____ Summer 20____

If currently enrolled and living in University Housing, do you have an assigned roommate? Yes No

If yes, Indicate full name and BW email address of roommate: _____

PROPOSED ESA INFORMATION

If the specific animal has not yet been identified, this information must be provided immediately upon identification

Type of animal: _____ Breed: _____

Name of animal: _____ Age: _____ Weight: _____

STUDENT CONSENT FOR RELEASE OF INFORMATION

Student must sign this form before providing it to the Mental Health Provider.

By signing below, the student grants DSS permission to contact the mental health provider for additional information.

I, _____ (printed name of student), hereby authorize DSS to obtain and/or release information from/to the undersigned provider in order to evaluate eligibility for an Emotional Support Animal. This consent will expire within 60 days.

Student Signature: _____ Date: _____

DIAGNOSTIC INFORMATION (Please print)

1. Date of initial contact with the student: _____

2. Date of last contact with the student: _____

3. Frequency of appointments with student (e.g., once per week, once per month): _____

4. DSM-V Diagnosis(es): Include all pertinent diagnoses or rule-out diagnoses using DSM-5 codes. Be specific with regard to the diagnosed disorder (i.e., *specific* anxiety disorder, depressive disorder, etc.). Indicate the severity level and descriptive features of each diagnosis: _____

5. Date of diagnosis: _____

6. Does the student currently participate in psychological therapy (e.g., psychotherapy, group therapy, cognitive-behavior therapy)? If yes, describe the nature of the therapy, how long the student has been in therapy, and how often the student participates: _____

7. Major Life Activities Assessment:

Select which of the following major life activities listed below may be affected because of the impairment. Indicate the degree to which each activity is impacted.

Life Activity	Negligible	Moderate	Substantial	Unknown
Concentrating				
Memory				
Eating				
Social Interactions				
Self-Care				
Stress Management				
Managing Internal Distractions				
Managing External Distractions				
Sleeping				
Organizing				

8. Provide information regarding the student's current presenting symptoms: _____

9. Provide historical information relevant to the student's psychological disorder and associated functioning (e.g., developmental, familial, medical, pharmacological, psychological, psychosocial): _____

INFORMATION ABOUT THE PROPOSED EMOTIONAL SUPPORT ANIMAL (ESA)

10. Is this an animal that you specifically prescribed as part of a treatment plan for the student, or is it a pet that you believe will have a beneficial effect for the student while in University Housing? _____

11. What symptoms will be reduced if the student has the ESA in University Housing? Be specific: _____

12. How does the need for the ESA relate to the student's ability to use and enjoy the living arrangements provided by the University? _____

13. Is there evidence that an ESA has helped this student, currently or in the past? If yes, describe in detail: _____

IMPORTANCE OF THE EMOTIONAL SUPPORT ANIMAL

14. In your opinion, how important is it for the student's well-being that the ESA be in residence on campus. Be specific: _____

15. What consequences, in terms of disability symptomology, may result if the accommodation is not approved? _____

16. Have you reviewed and discussed, with the student, the ESA Owner responsibilities (Section IV) associated with properly caring for an animal while engaged in typical college activities and residing in University Housing?

Yes No

17. Do you believe that the student is prepared to handle those responsibilities?

Yes No

18. Would the additional responsibilities exacerbate the student's symptoms in any way? If yes, describe in detail: _____

PROVIDER INFORMATION

Print, sign, date and complete all fields below

By selecting this box, I am verifying that the named student information is correct, that the student is a patient that I have been treating, and that **I am not a relative of the student.**

Provider Name (Print): _____ Date: _____

Provider Signature: _____

Title: _____

License or Certification #: _____

Mailing Address: _____

Phone: (_____) _____ - _____ Fax: (_____) _____ - _____

Email: _____

The student signed a Consent for Release of Information on page 4 of this form. We may reach out to you directly for more information or clarification to support the student's request for an Emotional Support Animal (ESA).

You may affix a business card in the space below:



Please complete this form in its entirety and submit it to:

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