

Disability Support Services Service Animal Agreement

Type of Service Animal:

Dog Other _____

Animal's Name: _____

My Service Animal is:

- Licensed and vaccinated in accordance with Butte County regulations
- Is in good health
- Will be on a leash or harness at all times
- In my full control at all times

My Service Animal has been individually trained to do the following work or tasks for my benefit:

I have read the Disability Support Services, Service Animal Policy.

I understand that if my Service Animal displays inappropriate behavior that disrupts the normal course of business or threatens the health or safety of others is automatic grounds for excluding my Service Animal from the premises.

I understand that Section 365.7 of the Penal Code prohibits any person to knowingly and fraudulently represent himself or herself, through verbal or written notice, to be the owner or trainer of any canine licensed as, to be qualified as, or identified as, a guide dog, signal dog, or service dog, as defined in subdivisions (d), (e), and (f), respectively, of Section 365.5 of the Penal Code and paragraph (6) of subdivision (b) of Section 54.1 of the Civil Code, and that a violation of Section 365.7 of the Penal Code is a misdemeanor, punishable by imprisonment in a county jail not exceeding six months, by a fine not exceeding one thousand dollars (\$1,000), or by both that imprisonment and fine

Signature:

Date:

Print Name: _____

Student ID #: _____