



University of  
**SCIENCE  
& ARTS**  
of Oklahoma

## **Emotional Support Animal (ESA) Accommodation Request**

The checklist below outlines the components of this document. Items with blank checkboxes indicate materials that must be completed and submitted. This checklist is provided for your convenience and does not need to be submitted with your application.

### **Item Checklist**

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- **Owner's Rules & Responsibilities for an ESA** (p. 2–5)
  - ☐ Student Acknowledgment and Signature Agreement (completed and signed)
- **Letter to the Licensed Healthcare Provider** (p. 6–11)
  - ☐ Student Verification for an ESA Request (completed and signed)
  - ☐ Letter of Recommendation on professional letterhead from licensed healthcare provider
- **Animal Identification & Registration** (p. 12)
  - ☐ Animal Identification & Registration Form (completed)
  - ☐ Verification of updated city (Chickasha) pet license
  - ☐ Photos of the animal
  - ☐ Photos of all applicable supplies to be kept in university housing
- **Emergency Handler Information for USAO Housing** (p. 13)
  - ☐ Emergency Handler Information form (completed)

## **Owner's Rules & Responsibilities for an Emotional Support Animal**

Emotional support animals (ESAs) approved to reside with their owner in university housing must meet and maintain the following requirements and regulations, as established by the Office for Accessible Education (OAE) in compliance with the Fair Housing Act (FHA), the U.S. Department of Housing and Urban Development (HUD), **and** the U.S. Department of Justice (DOJ).

1. **Not Pet Deposit:** USAO will not require a student with a disability to pay a pet deposit for an approved ESA. *(FHA/HUD requirement)*
2. **Custody and Care:** The student is solely responsible for the ESA's care. Friends, roommates, or suitemates cannot be held responsible. *(HUD guidance)*
3. **Compliance with Laws:** Before bringing the animal to campus, the student must comply with Grady County, Oklahoma state, and federal laws.
  - a. The student must provide proof of compliance (e.g., vaccination certificate, city (Chickasha) pet license).
  - b. USAO may request updated documentation as needed per university and local legal requirements.
4. **Identification:** While specialized ESA vests or ID cards are not required under federal law, the animal must have visible identification (e.g., collar and tag). Microchipping may be used for animals unable to wear a collar. *(HUD discourages requiring unnecessary identifiers but allows basic ID for safety)*
5. **No Specialized ESA Paperwork Required:** Online registries and certification services are not recognized under federal law. Students are not required to provide paperwork from such services. *(HUD/DOJ clarification)*
6. **Ongoing Need:** The ESA is only allowed if it continues to alleviate symptoms of the owner's disability. Students must notify the OAE and USAO Housing if circumstances change. *(FHA/HUD requirement)*
7. **Annual Re-registration:** Students must re-register annually with the OAE and provide an updated Letter of Recommendation from a licensed healthcare provider supporting the continued need for the ESA. *(HUD recommendation)*

8. **Care and Welfare:** Students are responsible for toileting, feeding, watering, grooming, and otherwise caring for their ESA. Abuse or neglect may lead to removal and university sanctions. *(FHA/HUD guidance on animal care)*
9. **Emergency Evacuations:** USAO personnel and emergency responders are not required to evacuate or care for ESAs during emergencies. The university is not responsible for loss or injury to the ESA in such situations. *(HUD guidance on emergency scenarios)*
10. **Campus Access Restrictions:** ESAs are only permitted in university housing and are not allowed in public university areas or at university events. *(FHA applies only to housing; other campus spaces fall under ADA, which does not cover ESAs)*
11. **Control in Public Areas:** When outside the assigned living space, the ESA must remain close to its handler and be as unobtrusive as possible to other residents and USAO personnel. The ESA must also be crated or controlled by a leash or harness no longer than six feet, unless:
  - a. The student's disability prevents the use of a leash; or
  - b. The use of a leash or harness would interfere with the animal's ability to provide emotional support related to the student's disability. *(FHA/HUD guidance on assistance animals)*
12. **Permitted Reasons for Leaving the Residence:** An ESA may be outside the assigned living space only for the following purposes:
  - a. Natural relief or toileting;
  - b. Traveling to a transit stop or personal vehicle; or
  - c. Exercise. *(University policy based on HUD functional limitations)*
13. **Unattended Animals:** ESAs may not be left alone for extended periods of time.
  - a. The animal must be crated or confined when the student is away.
  - b. The animal cannot remain in housing during overnight absences.
  - c. USAO-permitted personnel may enter the residence to address suspected animal distress. *(HUD and university-level care and access considerations)*
14. **Notification During Maintenance Requests:** Students must notify university housing staff of an animal's presence when submitting any service request and, if possible, be present during the repair. During maintenance visits, ESAs must be

crated or removed from the area. *(Per HUD guidance on reasonable accommodation responsibilities.)*

15. **Property Damage:** Students are financially responsible for any damage or injury caused by their ESA. *(HUD guidance and standard lease obligations)*
16. **Excessive Cleaning or Damage Charges:** The owner may be charged for damage caused by the ESA and cleaning costs that exceed typical university requirements. Potential costs include, but are not limited to:
  - a. Carpet replacement: \$650
  - b. Flea treatment: \$50*(University billing practice; allowed under HUD when charges go beyond normal wear and tear)*
17. **Pest Control:** ESA residences may be inspected periodically. The student will be charged for pest control services if infestations are linked to the animal. *(HUD permits charges for damages beyond reasonable wear)*
18. **Allergy Precautions:** ESA owners may be required to use special laundry machines or protocols in shared spaces. *(University policy aimed at non-disruption to others)*
19. **Notification of ESA Presence:** USAO will notify roommates, housing staff, and emergency personnel about the ESA, limited to information relevant to safety and care, not the student's disability. *(HUD privacy and disclosure standards)*
20. **Policy Compliance:** The ESA must not interfere with residential operations or create hardship for others. *(HUD permits removal or denial if an animal poses a threat or burden)*
21. **Violation Review:** Violations and potential removal will be reviewed and determined by Housing and the OAE. Students may appeal under USAO's ESA grievance procedures. *(HUD supports due process in accommodation decisions)*
22. **Policy Agreement:** The student must adhere to all elements of this ESA agreement. *(Standard contract enforcement)*
23. **Submission of Documentation:** All documentation must be submitted to the OAE at [accessibilityservices@usao.edu](mailto:accessibilityservices@usao.edu). *(University enforcement under HUD guidance)*
24. **Annual Review:** The guidelines listed in this document may be updated annually. *(University discretion; consistent with HUD's recommendation for policy clarity)*

## Student Acknowledgment and Signature Agreement

By signing below, I, the owner, acknowledge that I have received, read, and fully understand the Owner's Rules & Responsibilities for an Emotional Support Animal as well as USAO's Animal Policy and Procedure Handbook. I agree to comply with the expectations outlined in both documents as summarized below:

- Comply with all university policies regarding the care, supervision, and control of my ESA.
- Ensure that my ESA does not pose a direct threat to the health or safety of others or cause damage to university property.
- Follow all applicable local, state, and federal regulations, including licensing and vaccination requirements.
- Remain financially and personally responsible for the care, behavior, hygiene, and supervision of my ESA.
- Maintain up-to-date documentation as required by the Office for Accessible Education (OAE).
- Abide by any future amendments to ESA guidelines communicated by USAO.
- Cooperate with USAO Housing and university-approved personnel and respond promptly to all requests related to my ESA.
- Accept the consequences of any violations, which may include the removal of my ESA and/or disciplinary action.

I understand that failure to follow these rules may result in the loss of my right to keep an ESA in campus housing. I further understand that USAO reserves the right to amend these rules as needed and that continued residence with an ESA requires annual review and reauthorization.

Owner Name (printed): \_\_\_\_\_ Student ID: \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### **For Office Use Only:**

Accessibility Specialist Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## **Letter to the Licensed Healthcare Provider**

Dear Licensed Healthcare Provider (e.g., licensed counselor, psychologist, physician),

A student at the University of Science and Arts of Oklahoma (USAO) has identified you as their treating provider and requested that you submit a **Letter of Recommendation** in support of their request for an **Emotional Support Animal (ESA)** accommodation in university housing. The Letter of Recommendation must be completed by the licensed healthcare provider on a **professional letterhead** in reference to the questions outlined in this form. USAO's Accessibility Specialist, who is authorized to evaluate and approve such accommodations, will review this request following federal disability law and institutional policy.

USAO generally accepts documentation from providers licensed in Oklahoma or in the student's home state who have personal knowledge of the student in line with their professional responsibilities. **Please note that documentation obtained through online services in exchange for a set fee typically does not meet our documentation requirements.** Such letters lack sufficient information to support an ESA request and do not reflect an established provider-patient relationship.

The Federal Trade Commission (FTC) is investigating websites that sell documentation from health care providers to support ESA requests. These websites offer documentation that is not reliable for determining whether an individual has a disability or a disability-related need for an ESA, as the operators and health care professionals involved lack the personal knowledge required to make such determinations.

This form and any applicable supporting documents can be submitted via email at [accessibilityservices@usao.edu](mailto:accessibilityservices@usao.edu) or via fax at 405-574-1220.

Thank you for your attention to this matter.

Sincerely,

**USAO's Accessibility Specialist**

Note: ESAs may not be brought to university housing until official approval is granted by the Accessibility Specialist through an ESA approval email. Please submit all necessary information with sufficient lead time to allow full consideration of the request.

## Student Verification for an Emotional Support Animal Request

These forms are part of USAO's process for evaluating a student's request to keep an emotional support animal (ESA) in university housing as a reasonable accommodation for a documented disability. The fields below must be completed by the student requesting the ESA accommodation before submitting the forms to their licensed healthcare provider for review and completion.

### Student and Animal Information

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- |                           |  |
|---------------------------|--|
| • Student Name:           | • Animal's Name                                    |
| _____                     | _____  |
| • Student ID Number:      | • Type/Breed of Animal:                            |
| _____                     | _____  |
| • Student Email:          | • Animal's Age:                                    |
| _____                     | _____  |
| • Student Contact Number: | • Size of crate required for<br>containment: _____ |
| _____                     |  |

### Student Agreement

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By signing below, I consent to my licensed healthcare provider sharing relevant information with USAO's Accessibility Specialist in the Office for Accessible Education (OAE) about my need for an ESA as an accommodation. I understand that this form must be submitted to the OAE within **60 days of my (the student's) signature**, and that ESA approval is subject to annual renewal and reauthorization.

Student Name (printed): \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Relevant Questions for the Letter of Recommendation

Dear Licensed Healthcare Provider,

The student who identified you as their treating provider has provided their personal information, details about their proposed emotional support animal (ESA), and signed consent to release relevant information on the previous page. We respectfully ask that you review this information and consider the questions outlined below prior to writing a separate Letter of Recommendation on your professional letterhead.

1. **Disability Qualification:** Federal law defines disability as a “physical or mental impairment that substantially limits one or more major life activities.” This means that a diagnosis alone does not necessarily equate to substantial limitation. What is the nature of the student’s mental health impairment, and how is the student substantially limited?
2. **Provider-Student Relationship:** Documentation of the disability must come from a provider with direct personal knowledge of the individual requesting the ESA. This ensures the provider can reliably verify both the need for the ESA and the connection between the disability and the animal’s presence in university housing. When did you first meet with the student regarding this mental health diagnosis?
3. **Recency and Mode of Interaction:** What is the nature of your meetings with this student (e.g., face-to-face or virtual interactions), and when did you last interact with the student regarding their mental health diagnosis?
4. **Frequency of Contact:** How often have you seen the student (or plan to see the student) for further counseling or treatment?
5. **Symptom Mitigation by ESA:** What specific symptoms is this student experiencing, and how will the presence of an ESA mitigate those symptoms? (Note: General statements such as “the animal alleviates anxiety” are typically insufficient. Please explain how the animal addresses specific symptoms of this student’s disability.)
6. **Animal Type and Suitability:** Dogs and cats are most often requested as ESAs and seem best suited to adapting to the communal living setting in university



housing. If another type of animal is suggested for or by this student, please explain why you believe that specific animal is a better choice.

7. **Past or Current Benefit:** Is there evidence that an ESA has helped this student either in the past or currently? If not, why do you believe this may be an effective support for the student now?
8. **Impact of Potential Removal:** If the animal is approved to live on campus but is later removed due to violation of policy (e.g., the animal injures someone or destroys property), how do you believe this removal would affect the student? Is there a way to balance this impact against the benefit you expect the animal to provide for the student?
9. **Discussion of ESA Responsibilities:** Have you discussed the responsibilities associated with proper care for an animal while residing in campus housing and engaging in typical college activities? Do you believe those responsibilities might exacerbate the student's symptoms in any way?
10. **Provider Information:** Please ensure the following information is included in the Letter of Recommendation before final submission:
  - Name
  - Address
  - Telephone #
  - Email address
  - Fax #
  - Professional Signature
  - Date
  - Type of License
  - License #
  - State of Licensure

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We appreciate your time and thoughtful consideration of this ESA request. The **Student Verification for an Emotional Support Animal Request** form and accompanying **Letter of Recommendation** may be submitted directly by you or by the student to USAO's Accessibility Specialist via email at [accessibilityservices@usao.edu](mailto:accessibilityservices@usao.edu) or by fax at **405-574-1220**. Please note that the **Relevant Questions for the Letter of Recommendation** section is provided as a guide and **is not required** for final submission.

Thank you for your support in helping us ensure appropriate and equitable accommodations for our students. If further information or verification is needed to complete the review process, our office may contact you at a later date.

## **Animal Identification & Registration Form**

### **Student Information**

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- Student Name: \_\_\_\_\_
- Student ID: \_\_\_\_\_
- Semester/Year: \_\_\_\_\_
- Building Assignment (please circle):  
**Lewis      Shafer      Shackleford**  
**Sparks      Robertson      Other: \_\_\_\_\_**
- Room #: \_\_\_\_\_

### **Animal Information**

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- Name of Animal: \_\_\_\_\_
- Species/Breed: \_\_\_\_\_
- Age of Animal: \_\_\_\_\_
- Sex of Animal: *Male* or *Female*
- Date of Spay or Neuter \_\_\_\_\_
- Vaccination Names and Dates: \_\_\_\_\_
- Color(s)/Pattern: \_\_\_\_\_
- Physical Description of the Animal:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **Pet Licensure Verification** (copy must be attached or sent via email)

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- ☐ ESAs must have a current city pet license from the Chickasha Animal Shelter. Contact information, hours, and location are available on the shelter's website.

### **Required Pictures** (copies must be attached or sent via email)

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- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Animal's front      | <input type="checkbox"/> Food bowl         | <input type="checkbox"/> Other applicable |
| <input type="checkbox"/> Animal's right side | <input type="checkbox"/> Water bowl        | supplies (litter box,                     |
| <input type="checkbox"/> Animal's left side  | <input type="checkbox"/> Crate/cage/kennel | litter mat, etc.)                         |

## **Emergency Handler Information for University Housing**

In the event of an emergency, the student/owner must provide contact information for two emergency handlers who will take immediate responsibility for and remove the animal if needed. Please note that both contacts must:

1. **Reside off campus** in non-university designated housing;
2. Be familiar with **university animal care policies**; and
3. Remove the animal from campus **within six (6) hours of being contacted**.

If the primary handler is unable to remove the animal within the required timeframe, the backup handler will be contacted. If neither handler is available, **the university reserves the right to remove the animal and place it in the care of a local animal facility (Chickasha Animal Shelter) at the owner's expense**. The owner will be responsible for all costs associated with the care, boarding, and retrieval of the animal.

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### **Primary Emergency Handler**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

### **Backup Emergency Handler**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_