



## Emotional Support Animal Accommodation Request

**Hobart and William Smith Colleges (HWS)** follows the Americans with Disabilities Act (ADA), the most recent guidance from the Department of Justice (DOJ), and the U.S. Department of Housing and Urban Development (HUD) guidelines regarding support animals. In accordance with these standards, HWS outlines the following procedures for approved emotional support animals on campus.

More information regarding Section 504 can be found on page 37 in the Handbook of Community Standards. [community\\_standards.pdf \(hws.edu\)](https://www.hws.edu/community_standards.pdf).

### **DEFINITION: THERAPY/EMOTIONAL SUPPORT ANIMAL**

An emotional support animal (ESA) is an animal that provides emotional support to an individual with an emotional or mental disability or alleviates one or more symptoms of a disability. Unlike service animals, ESAs are not individually trained to perform specific tasks and do not assist a person with activities of daily living. Emotional Support Animals do not qualify as service animals under the ADA.

This definition does not affect the broader definition of “assistance animal” under the Fair Housing Act or the broader definition of “service animal” under the Air Carrier Access Act.

### **DEFINITION: PET**

A pet is an animal kept for companionship. A pet is not considered a service animal nor an emotional support animal and is therefore not covered by these guidelines and related policies. Residents are not permitted to keep pets (aside from fish in 10 gallons or less) in on-campus housing.

### **CRITERIA FOR DETERMINING IF THE PRESENCE OF THE ESA IS REASONABLE**

The Non-Academic Accommodation Committee (NAAC) will review the documentation and determine whether the request is reasonable. Accommodations will be determined on a case-by-case basis. The request may be denied if:

1. The specific animal poses a direct threat to the health or safety of others that cannot be reduced or eliminated by another reasonable accommodation.
2. The specific animal would cause substantial physical damage to the property of others that cannot be reduced or eliminated by another reasonable accommodation.



3. Supporting documentation is incomplete or inadequate.
4. The documentation provided does not sufficiently support the need for the ESA.

### **OWNER'S RESPONSIBILITIES**

An approved ESA is permitted only in the assigned living area of the student, except when the individual is taking the animal out for natural relief (not permitted in campus buildings such as classrooms, dining halls, athletic centers, residence hall lounges, etc.).

1. The animal must be in good health, and its care is the sole responsibility of the student.
2. The animal must be properly vaccinated, and documentation will be required. Owners must adhere to local ordinances regarding vaccinations and proper licensure.
3. The animal must be controlled by the owner. Animals should not be left overnight in on-campus housing to be cared for by anyone other than the owner.
4. HWS personnel are not required to provide care or food for any ESA, including during emergencies.
5. The animal must be on a leash or in a closed carrier when outside of the assigned residence.
6. The owner is financially responsible for the actions of the approved ESA, including bodily injury or property damage.
7. The animal must be housebroken, and the owner is responsible for cleaning up all waste and disposing of it immediately.
8. The animal must be solely owned by the student approved for an ESA. Animals cannot be fostered or borrowed.
9. The student must provide the appropriate department with emergency contact information for someone who can care for the ESA if needed. (See Emergency Handler Information on pg. 8)
10. Students may not interchange animals as their ESA. To change the designated ESA, the student must contact NAAC and resubmit all documents *except* the Verification Form.



## **REMOVAL OF ESA**

Emotional Support Animals may be removed from HWS premises if:

1. The animal is out of control and the owner does not take effective action to control it.
2. The ESA is not housebroken.
3. The ESA poses a direct threat to health and safety or displays aggressive behaviors.
4. The owner does not comply with the responsibilities outlined above.

## **CONFLICTING CONDITIONS & RESOLUTION PROCESS**

HWS acknowledges that some individuals may have medical conditions affected by animals, potentially qualifying as disabilities. The institution will consider the needs of all individuals to reasonably accommodate disabilities and resolve conflicts efficiently. The appropriate department will make reasonable efforts to notify individuals who may be impacted by the presence of the ESA, including Student Engagement personnel.

Students who wish to request a housing accommodation due to a conflicting disability should contact the NAAC (NAAC@hws.edu). Documentation will be required. If an ESA accommodation results in a housing concern, alternative options will be offered. The ESA may not be present during this resolution process. If satisfactory solutions are not reached, Student Engagement will determine which party must relocate, based on various factors.



**Before submitting a request for an Emotional Support Animal, please take note of the following deadlines:**

- For Spring Semester requests: **December 1st**
- For Fall Semester requests: **February 15th**
- For Incoming First-Year Students/Transfer requests: **July 1st**

Requests received after these deadlines will experience delays in processing.

## **Request Process:**

- 1. Submit an Accommodation Request/Self-Report:**
  - If you have never requested disability accommodations at HWS, complete the initial Accommodation Request Form ([access here](#)).
  - If you have previously received accommodations at HWS, complete a Supplemental Request on Accommodate ([instructions here](#)).
  - Answer all questions of the Initial/Supplemental Request Form as thoroughly as possible.
- 2. Meet with Disability Services ([schedule your meeting](#))**
- 3. Complete the Necessary Documents:**
  - After completing your Initial/Supplemental Request, present the Verification Form below to your provider.
  - Requests received without completed forms may not be reviewed.
    - Checklist for ESA Request documentation:
      - ✓ Signed Roommate/Suite mate Agreement Form
      - ✓ ESA Registration Form
      - ✓ Emergency Handler Information
      - ✓ Verification Form for ESA (completed by clinician)
      - ✓ Vaccination Records (if applicable)
      - ✓ Photo of animal
- 4. Upload Supporting Documents:**
  - Your provider can email the completed document to the Non-Academic Accommodation Committee (NAAC) at [NAAC@hws.edu](mailto:NAAC@hws.edu) or you can upload the completed document to your Accommodate profile.
  - To upload documents, use "Shortcuts" on the right side of the homepage.
    - Note: Forms sent via fax will not be accepted.



4. **Committee Review:**

- The Non-Academic Accommodation Committee (NAAC) will review your documentation and determine reasonable accommodation(s).
- The NAAC will notify you via email regarding the committee's decision once the review process is complete. The timeframe for this process may be extended at the committee's discretion.

5. **Post-Approval:**

- If your request is granted, Student Engagement will contact you to discuss policies related to the approved accommodation(s). **Note:** An approved accommodation does not guarantee a specific housing location.
- A student may appeal the outcome of a NAAC decision to the NAAC Appeals Committee. An appeal must be submitted by the student, with updated documentation, within 14 calendar days of the date when the official decision notification was sent. Appeals will be reviewed within 5 business days. Access the NAAC Appeals Form [here](#).

Contact the NAAC at [NAAC@hws.edu](mailto:NAAC@hws.edu) with any questions about your submitted request.

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**STUDENT (Please sign before providing this form to your clinician):**

By signing below, I consent to allow my health care provider to share information relevant to my housing accommodation request with Disability Services at Hobart and William Smith Colleges for the next 60 days (about 2 months).

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



## ESA Roommate/Suitemate Agreement Form

(\*Must be updated every year \*Not required if a student resides in a single)

This form must be completed by each roommate/suitemate of a student with an ESA before the animal arrives on campus.

By signing this form, I agree to share housing with the ESA and its owner. I confirm that I do not have allergies to this type of animal and have no objections to its presence.

I understand that I am not responsible for the care and feeding of the animal. However, if the animal poses a threat to health or safety, causes property damage, or is not well-cared for, I will promptly notify Student Engagement.

- **Name:**
- **Signature:**

- **Name:**
- **Signature:**

- **Name:**
- **Signature:**

- **Name:**
- **Signature:**



## ESA Registration Form:

### Animal Information

Name:

Type of Animal:

Breed (if applicable):

Color(s):

Photo uploaded to Accommodate:

☐

Vaccination information uploaded to Accommodate (if applicable):

☐

### Veterinarian Information:

Name

Phone #:

Email:

Address:

Last Visit Date:



## **Emergency Handler Information (if owner is unavailable):**

The owner must designate an emergency handler to support the animal's care in emergency situations. The emergency handler must be local and available to assist in an emergency situation. The owner must ensure that the emergency handler is familiar with these policies regarding animal care and supervision.

Name:

Phone:

Relationship to Owner:

Emergency Handler Signature:





## Verification Form for Emotional Support Animal (ESA) Accommodation

*To be completed by a clinician*

Clinicians should have an established relationship with the patient and be qualified to make the diagnoses and recommendations relevant to an Emotional Support Animal (ESA).

**Student's Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Diagnosis (DSM5-TR or ICD):** \_\_\_\_\_

**Level of Severity:** ☐ Mild ☐ Moderate ☐ Severe

**Date of Initial Diagnosis:** \_\_\_\_\_

**Date of Last Contact with Student:** \_\_\_\_\_

**Frequency of Meetings:** \_\_\_\_\_

**1. Federal law defines a person with a disability as someone who has a physical or mental impairment that substantially limits one or more major life activities.** Does the student's condition substantially limit their ability to function on campus?

- Yes
- No

**2. If yes, describe the current impact of the condition and specific symptoms that are substantially limiting:**

**3. How will the requested accommodation address these symptoms? Is there evidence that the accommodation has been beneficial in the past?**



4. Describe any treatment measures, including medication, which are currently being employed to assist with the student's disability:

5. Many people benefit from having their pets close by. An ESA differs from a pet in that it provides emotional support alleviating one or more symptoms or effects of a person's disability. **Are you recommending an animal:**

- As an ESA necessary for the student to have equal opportunity to use on-campus housing?
- As a treatment option to provide emotional support as it relates to the student's disability?
- As a pet that you believe will have a beneficial effect for the student while in residence on campus?

Please explain your choice(s) from above:

6. Have you and the student discussed the appropriateness of the specific accommodation?

7. Have you discussed the responsibilities associated with properly caring for an animal while engaged in typical college activities and residing in campus housing? Do you believe these responsibilities might exacerbate the student's symptoms in any way? If so, how?

8. If you do not recommend the specific accommodation, are there other accommodations you suggest?



9. Provide any additional relevant information about the student's functioning within the residential college campus setting:

Clinician's Name (Printed): \_\_\_\_\_

Signature: \_\_\_\_\_

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

Phone: \_\_\_\_\_

License #: \_\_\_\_\_

Date: \_\_\_\_\_

Please attach a copy of your business card and return this form to:

**Non-Academic Accommodation Committee**

Email: [NAAC@hws.edu](mailto:NAAC@hws.edu)