

# 25-26 ESA Housing Accommodation Request Form for New Incoming and Transfer Students with Disabilities

If you will be seeking a housing accommodation based on disability, you must complete the following steps by MAY 15, 2025:

- Complete registration with DSS if you are not already registered. Contact DSS (<u>dss@shu.edu</u>) or 973—313-6003 to begin registration process.
  - Student must Complete Part I and Sign the Consent for Release of Information.
  - Students must provide Part II to disability evaluator or physician.
  - Please submit your student portion of the form, Part I, as soon as you have completed it.
  - The provider section must be filled out fully by the provider and must be sent by the provider directly to DSS either via email at <u>dss@shu.edu</u> OR fax 973-761-9185. Any provider forms completed by the student will not be accepted for review.
  - Both parts of the form must be completed and received by DSS **by May 15, 2025**. Requests forms received after the deadline will be reviewed. However, approved accommodations after the deadline may be delayed due to space availability.
- All students must also complete the housing application through the Residence Life portal and pay the housing deposit by the deadlines posted: <a href="https://www.shu.edu/residence-life/">https://www.shu.edu/residence-life/</a>

All completed Request Forms will be reviewed by the Housing Accommodation Committee. The Committee will notify the student of its decision. Any approved accommodations will also be shared with the Office of Residence Life who will make the housing assignment for the student based upon space availability. Student preferences will be met as much as possible within the limits of hall capacities. If a student's request for accommodations is denied, they may appeal through the decision of the Committee through the DSS Appeal Procedure. They will also be advised to participate in the room selection lottery process.

# Part I: Student to complete the following: All questions are required. Incomplete forms will not be reviewed, so please check this carefully.

Name (please print clearly o	r type):
SHU ID#:	
Student Cellular #:	
SHU Email:	
Status: New Incoming	Undergrad New Transfer Student New Incoming Graduate Student

Year in School: Freshman Sophomore Junior Senior Graduate Student
Accommodation Request is for:     Fall   Spring   Summer
State the nature of your disability for which you are requesting a housing accommodation:
<ol> <li>Please order preference of residence halls on campus that you would like to live in. Please note that this is not guaranteed, as certain buildings cannot meet specific accommodation needs depending on availability.</li> </ol>
For Returning Students Only:  Cabrini Hall  Neuman Hall (No elevator)  Xavier Hall  Serra Hall (No elevator)  Turrell Manor (Off campus – No parking at building)  Ora Manor (Off campus – Minimal parking by lottery – Medical Exception Parking Requests Due 6/1/25)
Residence Hall Rates <a href="https://www.shu.edu/bursar/tuition-and-fees.cfm#residencerates">https://www.shu.edu/bursar/tuition-and-fees.cfm#residencerates</a> .
3. Please answer regarding your emotional support animal. Any additional accommodations you may need other than a ESA will need to be filled out on the 2025-2026 Disability Housing Accommodation Request Returning Students.  Emotional support animal (specify type & breed of animal).
Please explain the functional limitations of your disability that will be significantly alleviated by the emotional support animal.
4. Please describe your care plan for taking care of your emotional support animal on campus if approved:
5. Have you ever been the sole caretaker for this emotional support animal and if so, for how long?
6. Have you had this accommodation at Seton Hall University in the past? If so, please specify when you had this accommodation:

7. Local Emergency Contact for Animal (Emergency Contact May Not Be a S	Student Living in Residence Halls):
Name:	
Email:	
Phone Number:	
Relationship To You:	
8. Please attach copies of your animal's vaccination records. Please indicate your animal:	date of most recent veterinarian visit for
9. Please add any other information you feel is important for us to consider i	n reviewing your request.
Student Signature:	Date:
Please sign the release below and submit the forms to your physician or treating clinic completed and submitted directly by your provider to <a href="mailto:dss@shu.edu">dss@shu.edu</a> or via fax 973-76 will not be reviewed.	cian to fill out pages 4-8. All pages must be 1-9185. Any student filled out provider forms
Consent for Release of Information (to be completed by student):  I authorize Print Physician or Provider's name requested by this form to the office of Disability Support Services at purpose of evaluating my request for housing accommodations. I also information related to my housing accommodation request. I understant information will be shared on a "need to know basis" with other university.	Seton Hall University for the so allow both parties to discuss any stand that my personal medical
Student Signature:	Date:
Physician or Disability Provider Verification  Accommodations are only available to students identified as having a disabil disability is defined under the Americans with Disabilities Act as "a physica limits one or more major life activities." Examples of major life activities are eating, sleeping, walking, standing, lifting, bending, speaking, breathing, lear communicating, working, performing manual tasks, and caring for oneself.  Please type answers or write clearly. Forms with illegible handwriting will be accommunicating.	I or mental impairment that substantially e: Major bodily functions, seeing, hearing, ming, reading, concentrating, thinking,
Based on this definition does the individual have a disability?  Date of original diagnosis:	YesNo

	Date of most recent evaluation/treatment session:  Is the student currently under your care?YesNo  How long have you been treating this student for this condition?
2.	State the student's disability diagnosis or diagnoses, including diagnostic code, if applicable.
3.	Is the emotional support animal an integral component of an ongoing treatment plan for the condition in question?  Yes No
If	yes, please elaborate on how the requested accommodation is an integral component of the treatment plan:
4.	Describe the student's functional limitations or behavioral manifestations caused by the condition:
5.	Please describe the type, severity, and frequency of symptoms related to this disability.
6.	How long has the student had this emotional support animal you are recommending?
7.	When did you recommend the student get an emotional support animal?
8.	Please explain how the emotional support animal will significantly alleviate the functional limitations of the student's disability.

9. Do you have any concerns about the student's ability to be the sole caretaker for this emotional support animal in campus housing and if so, please specify what those concerns are:
10. Has this student been the sole caretaker for this emotional support animal and if so, for how long?
11. Is the emotional support animal an integral component of an ongoing treatment plan for the condition in question?  Yes  No
If yes, please elaborate on how the requested accommodation is an integral component of the treatment plan:
19. Have you considered any alternative accommodations that would provide the same benefit to the student other than an emotional support animal or other recommended housing accommodations, if so, please elaborate:
20. Is there anything else we should know that we haven't asked about? If so, please elaborate here.

As part of our evaluation process of ESA requests we will give providers a call to discuss. If you need a signed release from the student to speak to us about their treatment, please discuss it with the student.

### THIS SECTION MUST BE COMPLETED FOR FORM TO BE VALID

Physician or disability evaluator INFORMAT request for it to be completed again.)	TION (Please Print legibly and/or use your stamp – if we cannot read this, we will
Name:	
Title:	Specialty:
Office Address:	
Phone:	
License/Certification Number and State of	License:
Signature:	Date:
Providers	must Fax or Email completed form directly to:
(97	Seton Hall University Email: <u>dss@shu.edu</u> 73) 313-6003 (p), (973) 761-9185 (fax)
Prov	vider forms cannot be sent by students.

# **SHU Emotional Support Animal Procedure**

Students with disabilities who request the assistance of an emotional support animal may request an accommodation through Disability Support Services (DSS). Requests for housing accommodations are reviewed by a committee based upon necessity to ensure equal access to the housing program. Students must receive permission before bringing a support animal to campus.

# **Procedures to Request Permission for a Support Animal**

Any student who wishes to bring an emotional support animal to Seton Hall University must register with Disability Support Services and provide documentation from an appropriate medical clinician that the individual is a person with a disability, and that the presence of the animal is a reasonable and appropriate accommodation.

To register with Disability Support Services, a student will need to do the following:

- Complete a Self-Identification form (available at: <a href="https://hayes.accessiblelearning.com/s-SHU/ApplicationStudent.aspx">https://hayes.accessiblelearning.com/s-SHU/ApplicationStudent.aspx</a>)
- Provide comprehensive information from a licensed professional who can document your disability. Documentation
  guidelines and verification forms specific to your disability are available at <a href="https://www.shu.edu/disability-support-services/forms.cfm">https://www.shu.edu/disability-support-services/forms.cfm</a>; DSS staff will need to speak to the student's provider about the documentation and emotional support animal recommendation. Students need to sign any required release of information forms their provider's office may have ahead of submitting this housing accommodation request form to facilitate the evaluation of the request.
- Submit the ESA Housing Accommodation Request Form. Consideration of requests after the deadline may be limited by available resources.
- Submit a record of vaccinations from a licensed veterinarian dated within the last calendar year. Proof of vaccinations must be provided on an annual basis. If an animal does not require vaccinations, a letter of good health from a veterinarian is required.

- Meet with a DSS staff member for an intake appointment if not already registered. If already, registered DSS staff
  may request to meet with you to discuss any questions on your housing accommodation request.
- Students will receive written notification of a decision through their university email account.
- Students who are approved to have an emotional support animal on campus will need to attend a required emotional support animal orientation meeting with DSS staff. Residence Life staff may also participate. No emotional support animal is permitted to move onto campus until after the student has attended the orientation.
- Memos for Public Safety will be issued following the student's emotional support animal orientation meeting allowing for them to move their emotional support animal on campus.
- If needed, DSS will request a signed ESA agreement by roommates/suitemates. DSS will let you know if this is required. This is generally implemented when an ESA is being added to a room when students have already selected into the room or been placed into the room ahead of the ESA request being made. Once a room placement has been in place DSS must communicate with present roommate(s) to ensure that the other resident(s) do not have conflicting allergies, phobias, or objections to living with an animal. If a conflict exists, DSS will work with Residence Life to determine if there is an alternative room placement available to facilitate the accommodation. If not, students will be placed on a waiting list pending an available space becoming available to facilitate the accommodation.

# **Responsibility of Persons with Emotional Support Animals**

Care and Supervision: Care and supervision of the animal are the responsibility of the individual who benefits from the animal's use (i.e., the partner). The partner must commit to providing proper care for the animal, which includes feeding, fresh water, exercise, and rest. The partner is required to always maintain control of the animal. The animal must be on a leash, harness, or other tether when in public places, unless doing so would inhibit the animal's ability to be of service. The partner is also responsible for maintaining a clean-living environment for the animal, ensuring the cleanup of the animal's waste and, when appropriate, must toilet the animal in areas designed by the University. Owners of emotional support animals are responsible for their care in the residence halls at all times. If at any point, the owner cannot care for the animal, as in the case of illness or hospitalization, a local emergency contact must be on file with Disability Support Services and the Office of Residence Life, so the animal can be released to the care of the designated party.

Waste Clean-up: Relief areas will be designated on an individual basis with the collaboration of Disability Support Services and the University grounds personnel. Emotional support animals that are dogs should be walked off campus as much as possible and should not be walked in common areas such as the Green. Cleaning up after the animal is the sole responsibility of the partner. If a partner is not physically able to clean up after the animal, it is then the responsibility of the partner to hire someone capable of cleaning up after the animal. The person cleaning up after the animal should always carry supplies sufficient to clean up the animal's feces whenever the animal is on campus and properly disposal of waste. Waste disposal via university plumbing is prohibited in university residences. DSS or Residence Life can provide guidance on where to appropriately dispose of animal waste. In the case of a support animal that deposits waste into a designated cage or litter box, the partner is responsible for ensuring the designated receptacle is kept clean to maintain the cleanliness of the room. Health and Vaccination: In accordance with local ordinances and regulations, the animal must be immunized against diseases common to that type of animal. For example, dogs must have current vaccination against rabies and distemper. Cats must have the normal shots required for licensure. Animals other than cats and dogs, living in university housing must have an annual clean bill of health from a licensed veterinarian. Documentation can be a health statement that includes a record of vaccinations from a licensed veterinarian dated within the last calendar year. Proof of vaccinations must be provided on an annual basis. The animal must be kept clean and free of fleas and other parasites. The University has the authority to direct that the animal receives veterinary attention to ensure the health or safety of others residing within the University community.

Licensing: All Licensing laws must be followed in accordance with the town in which the student maintains permanent residency. If the animal is not licensed in the state of New Jersey, the owner must apply for a license within the municipality in which he/she resides on-campus. Animals must wear licensing tags required by the municipality in which it is registered. Damage: Owners of service or emotional support animals are solely responsible for any injury to others or damage to university property caused by their animals. SHU will not require any surcharges or fees for assistance animals. However, a person with a disability may be charged for damage caused by an assistance animal to the same extent that SHU would normally charge a person for the damage they cause. People with disabilities who are accompanied by assistance animals

must comply with the same university rules regarding noise, safety, disruption, and cleanliness as people without disabilities.

## **Restrictions on Emotional Support Animals**

SHU may pose some restrictions on, and may even exclude, an assistance animal in certain instances. Emotional support animals may reside in university housing and are restricted to the student's room. Permission to have a support animal in University Housing does not extend to other campus facilities or campus grounds at large. Exceptions to restricted areas may be considered by DSS on a case-by-case basis consistent with applicable laws.

# **Removal of Emotional Support Animals**

It is SHU's policy that partners are responsible for ensuring that their emotional support animal refrain from behavior that threatens the health and safety of others. The University may exclude an animal from campus for the following reasons:

- it is unruly, disruptive, or demonstrating aggressive behavior (e.g. barking, growling, jumping up on people) and effective action is not taken to control it.
- it is destructive.
- it is not housebroken (or in the case of a support animal that deposits waste into a designated cage or litter box, the owner fails to clean the designated receptacle such that the cleanliness of the room is not maintained).
- evidence of illness or poor hygiene, including but not limited to, strong odor, fleas, ticks, or other parasites.
- It poses a direct threat to the health or safety of others that cannot be mitigated by reasonable modifications of policies, practices, procedures, or the prevision of auxiliary aids or services.
- The handler violates this agreement.

In considering whether a support animal poses a direct threat to the health or safety of others, SHU will make an individualized assessment, based on reasonable judgment, current medical knowledge, or the best available objective evidence, to determine: (1) the nature, duration, and severity of the risk; (2) the probability that the potential injury will actually occur; and (3) whether reasonable modifications of policies, practices, and procedures, or the provision of auxiliary aids or services, will mitigate the risk.

If removal of an emotional support animal is determined to be necessary, the University will work with the partner to determine reasonable alternative opportunities to participate in the service, program, or activity without having the support animal on campus.

### **Conflicting Disabilities**

Student's Name Printed

Residence Life personnel will make a reasonable effort to notify tenants in the residence room where the animal will be located of the existence of a support animal. Students with medical or psychiatric conditions that are affected by animals (i.e., respiratory diseases, asthma, severe allergies, or specific phobias) are asked to contact Disability Support Services if they have a health or safety related concern about exposure to an emotional support animal. The individual will be asked to provide medical documentation that identifies the condition(s) and will allow determination to be made as to whether the condition is disabling and whether there is a need for an accommodation. If an animal-related conflict within a residence hall cannot be resolved agreeably, then the Department of Residence Life and Disability Support Services will collaborate to determine a solution and will consider the conflicting needs and/or accommodations of all persons involved. **Appeal Procedure** 

Appeals conce	rning this policy may be ad	ldressed through Di	sability Sup	port Services Appeal Poli	cy and Procedure.		
I (Partne <mark>r's Na</mark>	me),				been given permission to		
bring a		to Seton Hall Univ			ersity Housing as a reasonable accommodation that has		
• •	by Disability Support Serv I agree to abide by all reg	, ,	below indic	ates that I have had the c	opportunity to review this		
Name of Anima	al (Required: Photo must b	e included)		_			

**CWID** 

Signature	Date			
FOR OFFICE USE ONLY:				
Date of Communication with Student's Provice	er:			
DSS Staff who Communicated with Student's	rovider:			
Name of Provider DSS staff communicated with:				
If approved, date of emotional support anima	orientation attended by student:			
Date of ESA memo sent to Public Safety:				