



Office of Academic Support and Disability Services

EMOTIONAL SUPPORT AND SERVICE ANIMAL AGREEMENT

By my signature below, I confirm that I have read, understand and will abide by the guidelines in the Juilliard Emotional Support Animal or Service Animal Policy and Procedure. I understand and agree that my Animal must be under my control at all times.

Owner Name: Click or tap here to enter text.

Signature: Click or tap here to enter text.

Student ID: Click or tap here to enter text.

Date: Click or tap here to enter text.

OASDS Staff Name:

Dan Stokes, Director, Office of Academic Support and Disability Services

Signature: Click or tap here to enter text.

Date: Click or tap here to enter text.



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ROOMATE /SUITEMATE ACKNOWLEDGMENT

By my signature below, I understand that I will share the common area(s) of my assigned housing and/or my room with a service animal. I have familiarized myself with Juilliard's service animal policy and procedure. If any issues should arise related to the service animal, I will first discuss them with the service animal's owner. If we cannot resolve the issue, I will contact the Office of Academic Support and Disability Services Director. I understand that I, the service animal, and its owner may be assigned to an alternate room in the residence hall at Juilliard's discretion- if a satisfactory solution cannot be reached.

1. **Resident's Name:** Click or tap here to enter text.
Signature: Click or tap here to enter text.
Date: Click or tap here to enter text.
2. **Resident's Name:** Click or tap here to enter text.
Signature: Click or tap here to enter text.
Date: Click or tap here to enter text.
3. **Resident's Name:** Click or tap here to enter text.
Signature: Click or tap here to enter text.
Date: Click or tap here to enter text.
4. **Resident's Name:** Click or tap here to enter text.
Signature: Click or tap here to enter text.
Date: Click or tap here to enter text.
5. **Resident's Name:** Click or tap here to enter text.
Signature: Click or tap here to enter text.
Date: Click or tap here to enter text.
6. **Resident's Name:** Click or tap here to enter text.
Signature: Click or tap here to enter text.
Date: Click or tap here to enter text.
7. **Resident's Name:** Click or tap here to enter text.



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Signature: Click or tap here to enter text.

Date: Click or tap here to enter text.

8. Resident's Name: Click or tap here to enter text.

Signature: Click or tap here to enter text.

Date: Click or tap here to enter text.

9. Resident's Name: Click or tap here to enter text.

Signature: Click or tap here to enter text.

Date: Click or tap here to enter text.

10. Resident's Name: Click or tap here to enter text.

Signature: Click or tap here to enter text.

Date: Click or tap here to enter text.

11. Resident's Name: Click or tap here to enter text.

Signature: Click or tap here to enter text.

Date: Click or tap here to enter text.

12. Resident's Name: Click or tap here to enter text.

Signature: Click or tap here to enter text.

Date: Click or tap here to enter text.