

# LCSC Therapy Animal Agreement

Employee Name \_\_\_\_\_ Date \_\_\_\_\_

Building/Room Number \_\_\_\_\_ Faculty/Staff ID \_\_\_\_\_

Email \_\_\_\_\_ Ext. \_\_\_\_\_

A faculty/ staff member requesting to have a therapy animal with them on campus must show proof of the following requirements:

**License:** The animal must meet the licensing requirements set by the City of Lewiston City Codes.

<https://www.cityoflewiston.org/content/850/888/894/948/956.aspx>. Include a copy of required animal license (dog only) as required by law.

**Health Records:** The faculty/staff member must submit an animal's health screening from a licensed veterinarian dated within the past year. The statement should include proof of required vaccinations including rabies. This must be updated annually as required by law.

**Therapy Animal Registration:** Show proof of registration with a therapy program which includes your ID#, Qualification Rating, Expiration Date, and if any, special qualifications.

Date(s) & Times the animal will be on campus: \_\_\_\_\_

Location: \_\_\_\_\_

Animal Information	
Animal Name:	Animal Type/Breed:
Animal Weight:	Spayed or Neutered Date:
Rabies Tag #/ Date:	Certificate Health Date:
Emergency Contact Name and Cell Phone:	
Veterinarian Name and Contact:	
Veterinarian License Number and State:	

Outdoor location appropriate for animal to void: \_\_\_\_\_

I verify, to the best of my knowledge, that all the information provided on this form is correct and I understand the steps I must take in order to have an animal on campus for therapy purposes. I also acknowledge that I have read, understand, and will follow the Lewis Clark State College Policy and Procedure for Service/Companion/Therapy Animal, Policy # 5.309 found at lcsc.edu

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department Head Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return completed registration form to or have any further questions please contact us:

LCSC Human Resource Services

500 8<sup>th</sup> Ave Lewiston ID 83501

ADM 102

Office: 208-792-2269

[HR@lcsc.edu](mailto:HR@lcsc.edu)



Thank you for your interest for therapy animal program on LCSC campus!

We pride ourselves with providing our students and staff with the availability to animal therapy. With this exciting venture we require specific guidelines for the health and safety of the campus and animal therapy team.

- 1) The therapy animal must wear a harness, cape, identification tag or other gear that readily identifies its status at all times.
- 2) The handler must be in full control of the therapy animal at all times. The care and supervision of a therapy animal is solely the responsibility of its handler.
- 3) The handler must assure the therapy animal is on a leash at all times, except when it is crated. Exceptions will not be made.
- 4) Handlers must assure their therapy animals meet local, county, and/or state license or permit regulations. It is required that therapy animals have an owner identification tag.
- 5) Handlers must comply with local, county, and/or state vaccination and health requirements, which may include distemper, Parvovirus, Parainfluenza, and Bordetella. A copy of immunization records must be submitted with a proposal for the animal to be on campus. Animals must have an annual clean bill of health from a licensed veterinarian, including current vaccinations and immunizations against diseases common to that type of animal. Therapy animals must be pest and parasite-free (i.e., not infested with fleas or ticks).
- 6) All handlers must carry equipment sufficient to clean up the animal's feces, immediately remove the waste and be responsible for the proper disposal of the animal's feces. Handlers are responsible for any damage caused by the waste or its removal. Crates and cages must be clean and odor-free.
- 7) Handlers must assure that their animal is in control and remove the animal from college facilities if it becomes disruptive.
- 8) Food and water areas must be kept clean, and food must be stored properly.

At all times, treat all animals, all people, and the environment with respect, dignity, and sensitivity, maintaining the quality of life and experience for all who are involved.

Your service will be terminated under the following situations or under the LCSC Disabilities Services Discretion.

1.) LCSC may require a service, companion, or therapy animal to be removed from any LCSC facility or location if one or more of the following occurs:

- a. The animal's behavior is aggressive in nature.
- b. The handler is unable or unwilling to maintain proper control over the animal or if the other provisions outlined in this policy are unmet
- c. The animal's presence creates a significant hazard to the academic or workplace environment.
- d. The animal's presence fundamentally alters or is disruptive to the workplace and/or learning environment or educational program.
- f. Instances of conflicting disabilities (e.g. an extreme allergic reaction to animals) will be reviewed by Disability Services or Human Resources, as appropriate, to consider the needs of both persons, and to resolve the conflict as fairly and efficiently as possible.

(Pet Partners Code of Ethics and Policy and Procedures, <https://petpartners.org/volunteer/our-therapy-animal-program/volunteer-policies-procedures/>, 3/4/19)

If you have any further questions or comments please contact:

LCSC Human Resource Services  
500 8<sup>th</sup> Ave Lewiston ID 83501  
ADM 102  
Office: 208-792-2269  
[HR@lcsc.edu](mailto:HR@lcsc.edu)