

DISABILITY ACCOMMODATION REQUEST FOR EMOTIONAL SUPPORT ANIMAL IN UNIVERSITY HOUSING

Texas Christian University (“TCU” or the “University”) recognizes the importance of providing reasonable accommodation in its housing policies and practices where necessary for students with disabilities to use and enjoy University Housing. A reasonable accommodation is an exception to the usual rules or policies that a resident with a disability may need to have an equal opportunity to use and enjoy University Housing. This form is for use in requesting, as an accommodation, an exception to TCU’s usual policy that animals are prohibited in TCU housing, i.e., permission to have an animal which a student considers to be an Emotional Support Animal (“ESA”) in University Housing.

You must complete this form and return it to the Student Disability Services Office simultaneous with registering for University housing. If the request is made fewer than 60 days before you intend to move into University housing, HRL cannot guarantee that it will be able to meet the request during the first semester or term of occupancy. **Requests for animals presented in the middle of the semester may not be able to be accommodated until the following semester.** You may return this form by regular mail or a copy by Fax, or e-mail (you will be asked to present the original copy when you meet with a disabilities specialist after arriving on campus), to:

The TCU Student Disability Services
Sadler Hall, Room 1010
TCU Box 297710
Fort Worth, TX 76129

Phone: 817-257-5358
E-mail address: disabilityservices@tcu.edu

Please answer the following questions:

1. Name of Student: _____
2. TCU Student Identification Number: _____
3. Permanent Address: _____
4. TCU Residence (If any): _____
5. Telephone Number and E-mail address: _____

6. Please describe your disability and the symptoms/effects/functional limitations of your disability. Attach additional pages if necessary.

7. Explain and identify specific ways the ESA ameliorates the symptoms/effects/functional limitations of your disability. Attach additional pages if necessary.

8. What is your plan for responsible care of your ESA if you experience a flare-up or worsening of your disability?

9. You must provide current verification from a **qualified diagnostic and treatment professional** (including, but not limited to, a licensed psychologist, psychiatrist, or other professional with training and expertise in the diagnosis of mental health disorders) establishing that you have a disability and that an ESA is necessary to provide you an equal opportunity to use and enjoy University housing. Please identify the person that can provide such a verification.

10. Are you requesting any accommodation(s) from TCU related to your disability other than an exception to the rule which prohibits an animal in University Housing? YES _____ NO _____

11. If "yes" then what other accommodation(s) are you requesting? Additional information and documentation may be required.

Please provide written consent for DS Office to contact your qualified diagnostic and treatment professional by completing the following section:

Name of your mental health professional: _____

Title: _____

Address: _____

Telephone: _____

Signature of Resident/Student: _____

Printed Name of Resident/Student: _____

Date of Request: _____

This signature authorizes the DS Office verifier to provide only the information necessary to verify whether the individual making the request has a disability and/or to evaluate if the reasonable accommodation is necessary to provide the individual an equal opportunity to use and enjoy University housing.

Please **initial**:

_____ I understand that this process can take up to 60 days and that it is my responsibility to submit the requested documentation.

Signature _____ Date _____

Witness _____ Date _____