



APPLICATION FOR EMOTIONAL SUPPORT COMPANION ANIMAL OR SERVICE DOG

Date: _____

Name: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Evening Phone: _____

Email Address: _____

Date of Birth: _____ Height: _____ Weight: _____ Sex: _____

Are you currently employed? Yes No

Employer's Name: _____

Employer's Address: _____

City: _____ State: _____ Zip: _____

Employer's Phone: _____

Occupation: _____

The highest level of education you have completed: _____

Marital Status: Married Single Separated Divorced

Primary Emergency Contact:

Name: _____ Phone: _____

Secondary Emergency Contact:

Name: _____ Phone: _____

Veteran Status: _____

Years served: _____ to _____ Current Rank/Rank at time of discharge: _____

Military Branch: Army Navy Air-Force Marines Coast Guard

In what war or conflict(s) did you serve: _____

Have you been diagnosed with Post Traumatic Stress Disorder and/or Traumatic Brain Injury?

Yes No

If yes, when and where was it diagnosed: _____

Please list your disability(s) and limitation(s): _____

How long have you been disabled: _____

Do you require the assistance of an attendant? Yes No

If yes:

How often do you have an attendant? _____

What does your attendant do for you? _____

Is your attendant aware that you are applying for a service dog or emotional support animal? Yes No

What are your expectations for/of your service dog or emotional support animal: _____

What is your mobility? _____

Have you experienced a spinal injury? Yes No

If yes, please list level of injury and details: _____

Do you have any other challenges in addition to your disability? Yes No

If yes, explain: _____

Are you able to walk? (Slowly, short distances, etc.) Yes No Normally

If yes, but limited, please explain: _____

Are you able to perform everyday tasks such as:

Feeding yourself: Yes No

Dressing yourself: Yes No

Personal Hygiene: Yes No

Maintain your own residence: Yes No

Manage your own finances: Yes No

Utilize outside services: Yes No

If your answer was no to any of the above tasks, who does these things for you? _____

Do you have any of these animals live outdoors? Yes No

If yes:

How many? _____

What kind? _____

Do they ever come indoors? Yes No When? _____

Please list all animals you have owned in the past ten years (if not listed above):

Type of Animal	How long did you have this animal?	What happened to this animal?

Have you ever had a service dog from another agency? Yes No

If yes:

Name of the agency: _____

Address of the agency: _____

Phone number of the agency: _____

When did you receive this dog? _____

Where is the dog now? _____

How long did you have this dog? _____

If you've had more than one dog, were they from the same agency? Yes No

Will you be able to walk your dog yourself? Yes No

If no, whom will you arrange to walk and clean up after your dog? _____
Will you be able to feed the dog yourself? Yes No

If no, who will feed the dog daily? _____

How many hours a day will your dog be alone? _____

Explain: _____

How much will the dog travel with you? _____

Do you plan to take your dog to work with you? Yes No

If yes:

Have you already discussed this with your employer? Yes No

Does your employer have any concerns about you bringing your dog with you? Yes

No

If Yes, Explain: _____

Have you ever had a negative experience with a dog? Yes No

If yes, please explain: _____

What breed was the dog? _____

Is there any particular breed you would NOT want as a dog? Yes No

If yes, please explain: _____

Are you willing to accept full responsibility for your dog's health? Yes No

Will you accept full responsibility for your dog's behavior? Yes No

How do you feel a dog can help you? Please describe: _____

We appreciate your time. The more we know about you, the easier it is to choose a dog with the right qualifications to work best with you.

Signature: _____ Date: _____

To assist us in fund raising, please answer the following questions:

Your answers to these questions are optional, not required. These questions are for statistical record keeping required by most grants. Your answers to these questions have no effect on your application whatsoever.

Are you familiar with American Disability Act? Yes No

Are you on public assistance? Yes No

What form(s) of assistance do you receive? _____

Are you a client of Vocational Rehabilitation? Yes No

How did you hear about the Dog Tag Buddies program? _____

Should I be accepted into the Dog Tag Buddies Emotional Support Companion/Service Dog program, I, the undersigned, will be required to demonstrate aptitude, competency, and a commitment to follow Dog Tag Buddies education, standards and training. The undersigned agree that if any of the standards of veterinary care, health, grooming, cleanliness, and housing are not met, or if the dog is repeatedly placed in danger or is receiving negligent care and/or treatment, Dog Tag Buddies has the absolute unequivocal right to permanently remove the dog from our possession with or without notice. The undersigned agree that in this case no compensation and/or refund of the sponsor's placement costs will be returned.

I understand that contributions are not payment for a service dog, nor a guarantee I will receive a dog. While contributions may be given to Dog Tag Buddies on behalf of a particular veteran, I understand those funds do not constitute a purchase. After I, the primary caregiver, have successfully completed educational training and made the required preparations to receive the dog, Dog Tag Buddies emotional support companion/service dog placement will proceed with the recipient and his or her family.

If at any time during the fundraising process or during team training, a Dog Tag Buddies representative determines you, a caregiver, partner, or family is unsuitable to continue placement of a dog, Dog Tag Buddies may exercise its right as stated above to withdraw the dog without monetary reimbursement to any party.

Signature: _____ Date: _____

I, _____ do hereby give my permission to Dog Tag Buddies to use any comments I make and any pictures or video tapes of me, both during training and after I receive my companion or assistance dog, for publicity. This permission continues until such time as I give them written notice rescinding said permission.

Signature: _____ Date: _____