

Kenosha Unified School District Request for Service Animal Accommodation in School

This form is to be completed by the parent/guardian requesting that their child be accompanied by a service animal in school, in accordance with the Americans with Disabilities Act (ADA), Section 504 of the Rehabilitation Act, Individuals with Disabilities Education Act (IDEA), and Wisconsin state law.

Student Information	
Student Name:	Date of Birth://
	Grade:
Parent/Guardian Name(s):	
Phone:	Email:
Service Animal Information Name of Service Animal:	Type of Animal:
	Type of Animal:
Breed/Description:	
Trained Tasks the Animal Performs (check all that apply):	
Guides student with visual impairment Alerts to sounds (hearing assistance) Assists with mobility (balance, retrieving items, etc.) Alerts to medical condition (e.g, seizures, diabetes) Provides psychiatric or neurological support (trained task	rs)

Responsibilities

By signing this form, I understand that:

- The service animal must remain under the student's control at all times (leash/harness unless it interferes with tasks).
- The animal must be housebroken and in good health.

Other (please describe):

- The animal may be removed if it is disruptive, aggressive, or not under control.
- I am responsible for the care, supervision, and costs associated with the service animal.
- The animal is in compliance with all requirements surrounding licensing and vaccinations and that the animal is used and handled in compliance with the animal's training and any applicable certification

Parent/Guardian Acknowledgment