
**Guidelines and Agreement:
Service or Support Animal in University Employment**

201_ - 201_**Employee/Partner Responsibilities:**

All service or support animals in University employment settings must meet the following requirements in addition to those outlined in the *UCSC Service/Support Animal Policy and Procedures*:

1. Provide the following registration:
 - a) Partner must register the animal with Santa Cruz County Animal Services.
 - b) Partner must keep all required vaccinations up-to-date.
 - c) The animal must have identification at all times. For cats and other small animals which may not tolerate collars and tags, microchip identification is sufficient. An exception can be made for animals that are primarily caged and confined to the place of employment.
2. The partner is at all times responsible for the behavior of the animal. A partner may be directed to remove an animal that is unruly or disruptive (e.g. barking excessively, running around, bringing attention to itself, jumping up on people, exhibiting aggressive behavior, repeated soiling of facilities) if the partner is unable or unwilling to take effective action to control the animal. Repeated instances of such behavior may result in exclusion from university facilities until the partner can demonstrate that s/he can effectively control the animal. Partner must also ensure that the animal is kept clean and well-groomed. Animals that are excessively unclean (e.g., repeated soiling of facilities, flea-infested, foul-smelling and/or shedding excessively) may be excluded from university facilities.
3. Animals must be leashed using a leash that is 6' in length or less, harness or tether, or securely confined in a crate or carrier, unless (1) the partner is unable to use a leash, harness, or tether due to disability or (2) use of such a restraint would impede the animal's safe and effective performance of its work or task. Support animals must be leashed or securely confined in a crate or carrier when outside the employee/partner's work environment. With the exception of traveling to and from the employee's car or public transportation, support animals are not allowed on general campus grounds beyond the employee's/partner's work location, without additional authorization.
4. The partner is responsible for any damage caused by their animal and must take appropriate precautions to prevent property damage or injury. The partner is financially responsible for the actions of the animal including bodily injury or property damage, including but not limited to any replacement of furniture, carpet, drapes or wall covering, etc. The partner is expected to cover repair and property damage costs.
5. The partner is responsible for any expenses due to costs incurred for cleaning which is above and beyond normal cleaning, including removal of odors caused by the animal, or for repairs to University premises.
6. The care, supervision and well-being of the service/support animal are the sole responsibilities of the partner at all times, including making sure the animal is not disruptive, keeping it clean and free of parasites, and taking it out to relieve itself as needed.
7. The partner must notify the Disability Management Coordinator, in writing, if the animal is no longer needed as a service or support animal. To replace or substitute a service or support animal, the employee/partner must file a new request.
8. Any violation of the above rules will be reviewed through the applicable employee Grievance Procedures.
9. Additional requirements may apply to support animals on a case-by-case basis.
10. This agreement will be reassessed annually.

By my signature below, I verify that I have read, understand and will abide by the Guidelines outlined here.

Employee/Partner Name: _____ Date: _____

Employee/Partner Signature: _____

Office Use Only

Disability Management Coordinator Signature: _____

Date: _____

University Employment Location: _____

Service animal Support animal (type of animal: _____)

Breed: _____

Sex: _____

Name of Animal: _____

Vaccinations Dated: _____

License: _____

County of licensure: _____

Spay/Neuter Date: ____ / ____ / ____