



**Saint Elizabeth University**  
**Office of Accessibility Services and Residence Life**

**Emotional Support Animal - Physician Form**

Office of Accessibility Services

Phone: (973) 290-4261

Email: [accessibility@steu.edu](mailto:accessibility@steu.edu)

Please read this entire form. Students may request to bring an Emotional Support Animal to reside in their dorm with them, if they have a qualified medical condition or psychological/medical disability defined by the Americans with Disabilities Act Amendments Act (2008). The initial request for an Emotional Support Animal is to be made with the Accessibility Services Coordinator according to the set guidelines below. This physician form needs to be attached to the Emotional Support Animal form with all other required documentation. Please reach out to Accessibility Services if you need assistance with this. Please note that requests for Emotional Support Animals that need a heat lamp will not be processed for safety reasons.

**Important Process Information:**

A completed request consists of this form and any additional materials/documentation that includes particular details. For more information on the complete process, please refer to the Steps to Having an Emotional Support Animal Form on the website. **The provider may not be someone with whom you have a significant emotional relationship** (e.g. spouse, parent, sibling, or other relative).

**Students Please Note:** All requests will be reviewed on a case-by-case basis and documentation of a specific need or disability does not guarantee that your request will be approved. **Please note that your emotional support animal may not be brought on campus until all of the required documents have been received and you have signed an Emotional Support Animal Agreement signed by Accessibility Services, Head of Security and Director of Housing.** Any animal brought on campus without approval will be deemed a pet and be subject to removal from campus by security.

Please note that if this is your dog's first dose of the rabies vaccine, that they are not considered "currently vaccinated" until 28 days after its initial dose. Please take this wait time into consideration. Your request cannot be approved until your dog is "currently vaccinated."

Please keep this timeline in mind and consult with a veterinarian and your provider **BEFORE** you adopt an emotional support animal to determine its suitability to live on campus in a small dorm.

**Student Information:**

Student's Last Name: \_\_\_\_\_

Student's First Name: \_\_\_\_\_

SEU ID #: \_\_\_\_\_

SEU email: \_\_\_\_\_

Home address: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

**This Section is to be completed by the medical provider**

1. What is your diagnosis of the student with his/her disability? Please include the DSM V or ICD 10 codes. \_\_\_\_\_

\_\_\_\_\_

2. How long has the student been under your care? Does the student require ongoing treatment from you? Another provider? If so, who? Please include contact information. \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

This form has a total of 3 pages.

3. Which specific symptoms will be reduced by having the Emotional Support Animal?  
Please describe the nexus between the animal and the symptom reduction.

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4. Have you discussed the responsibilities associated with properly caring for an Emotional Support Animal while engaged in typical college activities and residing on campus with your patient? Do you believe those additional responsibilities might exacerbate the student's symptoms in any way? \_\_\_\_\_

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**Healthcare provider, please provide supporting documentation for your patient's diagnosis using a professional letterhead that includes your health practice logo, address and phone number for verification purposes.**

Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_

Address: \_\_\_\_\_:

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Phone Number: \_\_\_\_\_

State, License No. \_\_\_\_\_

Students please attach this completed and signed form to the Emotional Support Animal Request form which can be found on the website and on the Steps to an ESA Form.