

Service Animals in Training Verification Form

Student Name: _____ Student ID: _____

Local Phone: _____

GC Email: _____

Residence Hall/Room: _____ I live off campus. _____

_____ I have provided my Certification of Training to Disability Services.

I recognize that I am a student enrolled at Grayson College, and I am requesting to have my Service Animal in Training with me on campus and in campus buildings. By signing below, I acknowledge that this form does not register me with Disability Services, but understand that I can complete the registration process if I choose.

I understand that I have to follow all policies within the Student Code of Conduct, and that my Service Animal in Training must comply with and abide by the same College policies and procedures that any Service Animal or Assistance Animal follows. This includes any policies specific to the Residence Halls while living in Grayson College campus housing.

Student Signature _____ Date _____

I have verified the Grayson College Disability Services Certification of Training documentation. I will forward necessary paperwork to the Director of Student Life and Housing.

SDS Staff Signature _____ Date _____