

Appendix B



Niagara Catholic District School Board

Request for a Service Animal

This information is being collected pursuant to the provisions of the Municipal Freedom of Information and Protection of Privacy Act and under the Authority of the Education Act, and will be used by Student Achievement K-12 Special Education. Questions about this collection should be directed to the Superintendent of Education – Student Achievement K-12 Special Education, Niagara Catholic District School Board, 427 Rice Road, Welland, Ontario L3C 7C1, 905-735-0240.

Student Name	<input type="checkbox"/> M <input type="checkbox"/> F	Date yyyy mm dd	
Parent/Guardian		Home Phone	
Address		Work Phone	
City/Postal Code		Date of Birth yyyy mm dd	
School		Teacher	
Grade Level	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	OEN #	

1) Reasons for request:

2) Length of time the student and service animal have worked together

3) I/We understand that it is our responsibility to:

- Provide the Principal with all required documentation, reports, certificates, evaluations in a timely fashion;
- Transport or walk the service animal to and from school or facilitate the use of Niagara Student Transportation Services (NSTS) transportation;
- Assume financial responsibility for the service animal's training, veterinary care, municipal license and other related costs;
- Participate in a school case conference meeting to inform the Principal of all relevant information that may affect our child, other students, staff, and/or visitors to the school;
- Assist the Principal to communicate relevant information to the school community;
- Work co-operatively with the school staff to make this accommodation a success;
- Provide the required equipment and service animal care items;
- Provide food, water and "bio-breaks" to the service animal as required;
- Immediately remove and dispose of service animal waste in a safe and environmentally friendly manner.

- 4) I/We understand that if the service animal exhibits any behaviours (i.e. growling, scratching, nipping, biting etc.) or health issues (vomiting, diarrhea, open wounds, fleas, tics, etc.) at school, the service animal will be removed until the plan is re-evaluated to ensure the safety of staff, students and visitors.
- 5) If approved, I/we give permission for this information to be shared with the school community and agree to the delivery of letters to the community.
- 6) I/We understand that the Principal shall preserve the confidentiality of all information received from me/us, and shall not use or disclose the information except as provided for in the *Municipal Freedom of Information and Protection of Privacy Act*, the *Education Act* or as otherwise required by law. I/we consent to the use and disclosure of the information by the Principal to such other Board personnel as may be required for the performance of their duties.
- 7) I/We acknowledge having received and read a copy of the NCDSB's **Appendix A: Information for Parents/Guardians Requesting a Service Animal in the School.**

Signature of Parents/Guardians: _____ Date: _____

For Office Use Only:

Request for Service Animal: Approved _____ Denied _____

Signature of Principal: _____ Date: _____

Signature of Coordinator of Special Education: _____ Date: _____

Signature of Family of Schools Superintendent: _____ Date: _____