## **Helena Public Schools**

## **School / Community Relations**

4035F

## **Service Animals**

Please provide the following information about the service animal.

1.	Parent/Staff and/or emergency contact information:  a. Contact Name:	
	b. Contact Residential Address:	
	c. City, State, Zip:	
2.	Type of service animal (dog* or miniature horse**):	
3.	Is the service animal required because of a non-apparent disability? Yes	_No
4.	What work or task(s) has the service animal been trained to perform? Please describe:	
5.	Has the student/staff member requesting use of the animal been trained as the animal's handler? Yes No	
6.	Is the student/staff able to independently care for the service animal's needs (i.e. bathroom, feeding, cleaning up messes, hygiene, etc.) Yes No	.,
7.	If the student/staff is not trained as the animal's handler, who will act as the train handler for the service animal during the school/work day?	ned
	*If the service animal is a dog, please list breed, age, and weight).	C
	** If the service animal is a miniature horse, please state the type, size, and weighthe horse	n OI