*Adopted: 10/24/2019 1st Reading: 9/19/2019*

*Revised: 2nd Reading 10/24/2019*

**899 SERVICE ANIMALS AND PET VISITS**

**I. PURPOSE**

The purpose of this policy is to establish procedures for the use of service animals at the Art and Science Academy (ASA), including school buildings, vehicles and other property.

**II. GENERAL STATEMENT OF POLICY**

ASA will comply with all state and federal laws, regulations and rules regarding the use of service animals by disabled staff or students under appropriate circumstances.

**III. DEFINITION OF SERVICE ANIMAL**

This policy applies to any guide dog, signal dog, or other animal individually trained to do work or perform tasks for the benefit of an individual with a disability, including, but not limited to, guiding individuals with impaired vision, alerting individuals with impaired hearing to intruders or sounds, providing minimal protection or rescue work, pulling a wheelchair, or fetching dropped items. Service animals do not include wild animals, farm animals and rodents and animals whose sole function is to provide emotional support, comfort, therapy, companionship, therapeutic benefits, or to promote emotional well-being.

**IV. PROCEDURES/REQUIREMENTS**

Use of service animals by staff or students with a disability is subject to the following procedures and requirements:

1. Staff members or parents must submit a request for the use of a service animal to the School Administrator. Such request must identify and describe the need for the service animal as it relates to the staff member or student’s disability and describe the manner in which the service animal will meet the individual’s particular need(s) and provide a letter from their physician who is the health care provider regarding the need for a service animal.
2. Requests for the use of service animals on School District property must, whenever possible, be made no less than three (3) weeks prior to the proposed use of the service animal. Under no circumstances may a service animal be on School District property without prior approval by the School Administration.
3. As part of the School District’s consideration of a request for the use of a service animal, the School District may require certain documentation, including, but not limited to:
   1. documentation that the service animal is properly trained and licensed;
   2. certification of proper vaccinations verified by a veterinarian;
   3. documentation that the handler for the service animal is properly trained; and
   4. documentation of adequate liability insurance.
4. The School District’s review of a request for the use of a service animal may include consideration by a student’s special education team and/or Section 504 team. Also, the School District may require a meeting with and/or additional information from the staff member or parent requesting the use of a service animal, including, but not limited to, documentation/consultation from the staff member’s or student’s health care provider.
5. The use of a service animal on School District property may be subject to a plan which introduces the service animal to the school environment, any appropriate training for staff and students regarding interaction with the service animal, and other activities or conditions deemed necessary by the School District. The School District’s approval of the use of a service animal on School District property is subject to periodic review, revision or revocation by the School District Administration.
6. Service animals must wear proper identification and always be on a leash or other form of restraint mechanism. It is the responsibility of the staff person or student (parent) who uses a service animal pursuant to this Policy to be the certified handler, providing proper handling of the service animal. In the case that the certified handler will not be with the service animal at school, identified staff must be trained to give commands to the service animal. Any cost incurred to handle the service animal will be the responsibility of the staff person or parent of the student who uses the service animal.
7. Service Animals will be allowed on school district transportation vehicles only when:
   1. It has been determined through the IEP or 504 process that the service animal is a necessary part of a transportation accommodation;
   2. The inclusion of the service animal is documented on the Appendix B form;
   3. The service animal is under the control of a properly trained handler at all times including entering and exiting the vehicle.
8. The School District retains discretion to exclude or remove a service animal from its property if:
   1. The animal is out of control and/or the animal’s handler does not effectively control the animal’s behavior;
   2. The animal is not housebroken or the animal’s presence or behavior fundamentally interferes in the functions of the School District; or
   3. The animal poses a direct threat to the health or safety of others that cannot be eliminated by reasonable modifications.

**V. LIABILITY**

The staff member or student/parent is liable for any damage to the School District or personal property and any injuries to individuals caused by their service animal. The staff member or student/parent who uses a service animal on School District property will hold the

School District harmless and indemnify the School District from any such damages.

Further, the staff member, student/parent will be required to submit a certificate of liability insurance covering the service animal and identifying the School District as an additional insured. The amount of required insurance coverage shall be determined by the School District

**VI. EXCEPTIONS**

From time to time it may be appropriate for staff or students to bring a non-service animal to school. However, this will be decided on a case by case basis and should not be a regular everyday occurrence. The primary consideration is disruption to the learning environment.

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| **Elementary Campus** | **Middle School Campus** |
| 903 6th Ave Ct NE | 1005 7th Ave |
| Isanti, MN 55040  **ISD #4227** | Isanti, MN 55040 |
| Phone: 763-444-0342 | Phone: 763-444-0039 |

**www.artandscienceacademy.k12.mn.us**

**APPENDIX A**

**REQUEST APPROVAL FORM FOR USE OF A SERVICE ANIMAL**

|  |  |  |
| --- | --- | --- |
| Student Name | Guardian Name | Date |

Identify and describe the need for the service animal as it relates to the staff or the student’s disability and describe the manner in which the service animal will meet the individual’s particular need(s).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Service Animal: Dog: \_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Animal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Letter from physician is attached: Yes \_\_\_\_\_\_ No: \_\_\_\_\_\_ Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Documentation attached that the Service Animal is:

Properly trained and, if applicable, licensed Yes \_\_\_\_\_\_ No: \_\_\_\_\_\_

Properly and currently vaccinated Yes \_\_\_\_\_\_ No: \_\_\_\_\_\_

Under the control of a properly trained handler. Yes \_\_\_\_\_\_ No: \_\_\_\_\_\_

Covered by adequate liability insurance Yes \_\_\_\_\_\_ No: \_\_\_\_\_\_

Name of Handler: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submit request to School Administrator

Annual Application Required

*Office Use:*

*Date Received: \_\_\_\_\_\_\_\_\_\_\_\_ Date of Scheduled Meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_*



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| --- | --- |
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| Isanti, MN 55040 | Isanti, MN 55040 |
| Phone: 763-444-0342  **ISD #4227** | Phone: 763-444-0039 |

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**APPENDIX B**

**SERVICE ANIMAL REGISTRATION/AGREEMENT**

|  |  |  |
| --- | --- | --- |
| Student Name | Guardian Name | Date |

Type of Service Animal: Dog: \_\_\_\_\_ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Animal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Letter from physician is attached: Yes \_\_\_\_\_\_ No: \_\_\_\_\_\_ Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Documentation attached that the Service Animal is:

Properly trained and, if applicable, licensed Yes \_\_\_\_\_\_ No: \_\_\_\_\_\_

Properly and currently vaccinated Yes \_\_\_\_\_\_ No: \_\_\_\_\_\_

Under the control of a properly trained handler. Yes \_\_\_\_\_\_ No: \_\_\_\_\_\_

Covered by adequate liability insurance Yes \_\_\_\_\_\_ No: \_\_\_\_\_\_

Name of Handler: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Transportation Plan: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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See accompanying 504 \_\_\_\_\_\_ or IEP \_\_\_\_\_\_ for additional information regarding this agreement.

I have read and understand the School District’s Service Animals Policy. I will abide by the terms of the Policy.

I understand that if my Service Animal is: out of control and/or the animal’s handler does not effectively control the animal’s behavior; not housebroken or the animal’s presence or behavior fundamentally interferes in the functions of the School District; or, poses a direct threat to the health or safety of others that cannot be eliminated by reasonable modifications, the School District has the discretion to exclude or remove my Service Animal from its property.

I agree to be responsible for any and all damage to School District property, personal property, and any injuries to individuals caused by my Service Animal. I agree to indemnify, defend and hold harmless ASA from and against any and all claims, actions, suits, judgments and demands brought by any party arising on account of, or in connection with, any activity of or damage caused by my Service Animal.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner - Signature ASA- Signature

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Note: This Registration/Agreement is valid until the end of the current school year. It must be renewed prior to the start of each subsequent school year or whenever a different Service Animal will be used.*