

Licensed Health Care Provider Form: Emotional Support Animal (ESA) Documentation

Purpose

This questionnaire is designed to provide SAS with information to evaluate an accommodation request to bring an ESA into University Housing-Residential Life. The attached form must be completed by the student's established medical provider such as a psychiatrist, psychologist, licensed social worker, or relevantly trained M.D. or licensed mental health provider.

Disability Definition

The legal definition of a disability includes two elements: (1) physical or mental impairment(s) which (2) substantially limits one or more of the major life activities of the person in question. Thus, disability has both diagnostic and functional elements, and BOTH elements need to be documented for effective determination.

ESA Definition

An Emotional Support Animal (ESA) is one that is necessary to afford the person with a documented disability an equal opportunity to use and enjoy UMKC Residential Life (on-campus housing). An ESA may provide physical assistance, emotional support, calming, stability and other kinds of assistance. ESAs do not perform work or tasks that would qualify them as "service animals" under the Americans with Disabilities Act.

Caution

This questionnaire serves to help Student Support Services at UMKC assess a student's request for an ESA as housing accommodation. There are individuals and organizations that sell animal certification or registration documents online and some will even provide alleged medical documentation of a disability after a brief phone interview. These services can be costly and are generally not recognized as legitimate by the University, the ADA or the DOJ. No federal or state agency requires that an ESA or service animal be "registered" or "certified" by a third-party (as of 2019); hence, most third-party online registration services take clients' money without providing a service that is necessary.

UMKC ESA Student & Provider Questionnaire

If a student is awarded an accommodation for an ESA, the ESA is approved for the assigned university campus housing living environment ONLY. **The approved ESA animal must reside in the student's room while the student is attending classes, visiting the dining halls, at the library, etc.** ESAs are allowed in the immediate dwelling (the student's residence hall room/living space). **ESAs are not allowed in other areas of campus.**

Student Information (to be completed by student)

Student's Name: _____

Date of Birth: _____ Phone Number: _____

Student Identification Number: _____

The student's requested accommodation is for the following term:

Please write the year next to the start term: Fall ____ Spring ____ Summer ____

Requirements to Continue the ESA Accommodation

- The ESA must be approved prior to the student bring them to campus.
- Students must complete the ESA renewal process each academic year – this process includes a questionnaire that SAS will send to students with instructions.
- In the event of the death of an ESA animal or the need to change the ESA animal (including the change to the same animal type) students with an ESA must :
 1. a) submit a new ESA Student & Provider Questionnaire and
 2. b) meet with SAS staff to seek a new ESA approval
- Students *approved* by SAS for the ESA housing accommodation must also provide UMKC Residential Life the following:
 1. Emergency Contact Information
 2. Photo of ESA
 3. Roommate Agreement & Pet Addendum
 4. Animal bill of health/vaccination for the ESA

The student signature below acknowledges the continued requirements to maintain the ESA accommodation at UMKC as outlined above.

Student's Signature: _____

Provider Information (to be completed by provider)

Instructions for the Provider

This form must be completed by a qualified professional with appropriate licensing and first-hand knowledge of the student's condition(s) through an established treatment history.

Additionally, the medical professional MUST observe the student with their animal. This professional must not be a family member of the student.

Name: _____

Title/Profession: _____

License Type & Number: _____

State of Licensure: _____

Phone: _____

Email: _____

Practice/Agency Name: _____

Address:

Student's Medical Diagnosis:

Name of animal observed: _____

Type of animal observed (species/breed):

Please describe how this animal assists the student with managing their diagnosis.

What date(s) did you observe the student with this animal?

Please explain how the animal's presence has a demonstrably positive effect on the student.

Please return the completed form to:

UMKC Roo Wellness - Accessibility Services
5110 Oak Street, Suite 225
Brookside 51 Building
Kansas City, MO 64112
Phone: (816) 235-5612
Fax: (816) 235-6363
Email: accessibility@umkc.edu

Additional information can be found on our website at:
<https://www.umkc.edu/wellness/services/accessibility/>