



COLORADO CHRISTIAN UNIVERSITY

Grace and Truth

Service Animal/Assistance Animal Registration Form

This form must be submitted and approved prior to the animal occupying the assigned space.

Resident Name _____ Student ID # _____

Animal Type (Circle One) *Service Animal* *Assistance Animal*

Animal's Breed: _____ Animal's Weight: _____

Animal's Name: _____

Physical Description of Animal: _____

Most Recent Rabies Vaccination Date: _____

(Record must be attached)

Spayed or Neutered Date: _____

(Record must be attached)

I acknowledge having read the Service and Assistance Animal section of the Disability Accommodations Policy (pp. 6-9) and agree to abide by its terms and conditions.

Signature of Resident

Date

Printed Name

CCU ID

Room/Apt #

Signature of Accommodations and Accessibility Coordinator

Date