

Emotional Support Animal (ESA) Policy and Agreement

Indian Hills Community College (IHCC) recognizes the importance of “Service Animals” as defined by the Americans with Disabilities Act Amendments Act (ADAAA), and of Emotional Support Animals (ESAs), supported by the Fair Housing Act. The college is committed to allowing individuals with disabilities the use of a Service Animal on campus to facilitate their full participation and equal access to IHCC’s programs and activities. IHCC is also committed to allowing ESAs, necessary to provide individuals with mental health disabilities an equal opportunity to use and enjoy Indian Hills Community College housing. This policy explains the specific requirements applicable to an individual’s use of an ESA in IHCC housing. IHCC reserves the right to amend this policy as circumstances require. This policy applies solely to ESAs that may be necessary in college housing. It does not apply to “service animals” as defined by the ADAAA, and whose presence on campus is explained in the [IHCC Service Animal Policy](#).

Although it is the policy of IHCC that individuals are generally prohibited from having animals of any type in college housing, IHCC will consider a request by an individual with a disability for reasonable accommodation from this prohibition to allow an ESA that is reasonable and necessary because of a mental health disability. However, no ESA may be kept in college housing at any time prior to the individual receiving approval as a reasonable accommodation pursuant to this Policy.

Definition of an Emotional Support Animal (ESA)

An Emotional Support Animal (ESA) is an animal that provides therapeutic emotional support for an individual with a diagnosed mental health disability. The purpose of an emotional support animal (ESA) is to alleviate or mitigate one or more symptoms or effects of a student’s disability that impact their ability to function in the campus environment. Unlike service animals that are trained to perform specific tasks that are important to the independence or safety of their disabled handler, ESAs are generally not trained to perform disability-specific tasks. Their therapeutic support is a function of their presence and interaction with the person with a disability without a task or training. ESAs are not pets, but they typically are animals commonly kept in households as pets. An ESA may be a dog, cat, small bird, rabbit, hamster, gerbil, fish, or other small, domesticated animal that is traditionally kept in the home for pleasure. Under guidelines from HUD, reptiles, barnyard animals, ferrets, monkeys, chickens, mice or rats, turtles or tortoises, and other non-domesticated animals, exotic animals, and/or animals posing high risk for Zoonotic diseases which can be transmitted from animals to humans are not considered common household animals.

Exceptions to these guidelines regarding animals serving as ESAs will be considered on a case-by-case basis.

The question in determining if an ESA will be allowed in college housing is whether or not the ESA is necessary, because of the individual’s disability, to afford the individual an equal opportunity to use and enjoy college housing, and its presence in college housing is reasonable. There is an expectation that an emotional support animal reflects an established, ongoing relationship with the student. The animal should be part of the student’s routine and provide consistent emotional support, rather than being obtained immediately prior to, or solely for the purpose of an accommodation request. However, even if the individual with a disability establishes necessity for an ESA and it is allowed in college housing, an ESA is not permitted in other areas of the college (e.g. dining facilities, libraries, academic buildings, athletic buildings and facilities, classrooms, labs, or other college property).

Number of Animals

Generally, only one animal will be approved to be in residence in a single housing unit.

Size of Animal Crate/Cage

An ESA must be crated when the student is not in the room. The size of crate/cage should be an appropriate size for both the space available in the housing unit as well as for the breed and size of the animal. IHCC Student Housing can assist with determining these dimensions. IHCC furniture cannot be removed from the resident's room.

Care of the ESA

The care of the ESA is the sole responsibility of the student. The responsibility of care for the ESA shall not fall to roommates, friends, family, or guests. Sharing your Resident Hall key with anyone is a Residence Life Handbook violation.

The student will:

- Provide appropriate restraint, control, and supervision of the animal at all times.
- Provide the animal with appropriate care, including food, water, shelter, health care, waste and odor management, and humane treatment.
- Clean up and dispose of all animal waste (both indoors and outdoors) in a timely and effective manner.
- Not allow odor, noise, damage, or other behavior of the animal that disturbs others or damages college grounds, facilities or property.
- Confine the animal when leaving the room in an appropriate crate/cage.
- Not leave the animal alone for a time period in excess of six consecutive hours per 24 hours. Any exceptions to this must be approved through IHCC Student Housing.
- Ensure the ESA is updated on all vaccinations necessary for its breed and age to ensure safety and protection of all humans and other animals (including but not limited to a current Rabies vaccination) throughout the entire duration of its time in on-campus residence.
- Students are responsible for any and all damages caused by their ESA or due to having an ESA in their residence hall.

Failure to abide by the ESA policy may result in a written warning, fine, and/or the removal of the ESA from on-campus housing

Maturity of the Animal

Generally, in order to live on campus an animal must be reliably housebroken, not disruptive to other residents, given a clean bill of health by a licensed veterinarian, able to effectively reside in a residence hall setting without causing harm to self or others, be at an appropriate age, breed, and size to live safely in a residence hall space, and have all vaccinations necessary for its breed, age, and size to ensure safety and protection of all humans and other animals. This typically occurs at at least 9 months of age.

Request for Housing Accommodation (RE: Emotional Support Animal)

The student and appropriate health care provider should complete the ESA Accommodation Request form on pages 3 and 4. Return it to the Student Disability Services Office at disabilityservices@indianhills.edu.

The student request will be evaluated by the IHCC Office of Disability Services. A recommendation regarding the housing accommodation request will then be sent to the student and to Student Housing. If approved, the student will complete the Animals in Residence Hall Agreement. An animal must not move into the Residence Hall until all Student Housing items are satisfied, and approval is received from the Director of Student Life. Requests for an emotional support animal (ESA) submitted after housing assignments have been finalized may require a housing reassignment. This is to ensure that the needs of all students, including roommates, are appropriately considered. If your ESA should change, please contact the Director of Student Life, Ben Wyldes, at ben.wyldes@indianhills.edu to complete a new Animals in Residence Hall Agreement.

Request for Housing Accommodation

Re: Emotional Support Animal

Student

Please sign this form before providing it to your mental health provider to complete.

Student's Name: _____

Date of Birth: ____ / ____ / ____ Student ID: _____

Phone Number: _____ Email Address: _____

Proposed ESA (if identified):

Name of Animal: _____

Type of Animal: _____ Weight of animal (lbs): _____

Breed of Animal: _____ Age of animal: _____

By signing below, I consent to allowing my health care provider to share any information relevant to my need for an ESA as an accommodation, as shown on this form, with Indian Hills Community College Disability Services Personnel for the next 60 days.

Signature: _____ Date: ____ / ____ / ____

Health Care Provider

(The health care provider need not use this specific form, but all the information requested here is necessary for the institution to have in order to consider the request for an ESA; the form is provided as a convenience.)

Student's Name: _____

The above-named student has indicated that you are the health care provider who has suggested that having an Emotional Support Animal (ESA) in the residence hall will have therapeutic benefit in alleviating one or more of the identified symptoms or effects of the student's mental health disability. Generally, we prefer documentation from providers in the State of Iowa or the student's home state who have personal knowledge of the student, consistent with their professional obligations. Letters purchased from the internet for a set price rarely provide the information necessary to support an ESA request.

The Federal Trade Commission (FTC) has been asked to investigate websites that purport to provide documentation from a health care provider in support of requests for an ESA. The websites in question offer for sale documentation that is not reliable for purposes of determining whether an individual has a disability or disability-related need for an ESA because the website operators and health care professionals who consult with them lack the personal knowledge that is necessary to make such determinations.

So that we may better evaluate the request for this accommodation, please answer the following questions:

Information About the Student's Disability

1. Does the individual identified above have a disability? Yes ____ No ____
2. If yes, is the need for an assistance animal related to that disability? For example, does or would an emotional support animal alleviate one or more of the symptoms or effects of the disability?
Yes ____ No ____

Information About the Proposed ESA

Please note that there are some restrictions on the kind of animal that can be approved for the residence hall; it is possible the student may be approved for an ESA, based on the information you provide here, but may not be allowed to bring the specific animal named.

Is the animal named here one that you specifically prescribed as part of treatment for the student, or is it a pet that you believe will have a beneficial effect for the student while in residence on campus?

What specific symptoms will be reduced by having an ESA, and how will those symptoms be mitigated by the presence of the ESA?

Is there evidence that an ESA has helped this student in the past or currently?

Importance of ESA to Student's Well-Being

In your opinion, how important is it for the student's well-being that an ESA be in residence on campus? What consequences, in terms of disability symptomology, may result if the accommodation is not approved?

This student was provided with a copy of the rules and restrictions surrounding the presence of an animal in residence in the University housing. Has the student shared those restrictions with you? Yes ____ No ____

Have you discussed the responsibilities associated with properly caring for an animal while engaged in typical college activities and residing in campus housing? Do you believe those responsibilities might exacerbate the student's symptoms in any way? (If you have not had this conversation with the student, we will discuss with the student at a later date.)

Thank you for taking the time to complete this form. If we need additional information, we may contact you at a later date. The named student has signed this form (page 3) indicating written permission to share additional information with us in support of the request.

We recognize that having an ESA in the residence hall can be a real benefit for someone with a significant mental health disorder, but the practical limitations of our housing arrangements make it necessary to carefully consider the impact of the request for an ESA on both the student and the campus community.

Please provide contact information, sign and date this questionnaire (below), and return it to **Disability Services Office, Indian Hills Community College, 525 Grandview Ave, Ottumwa, IA 52501** or fax **641-683-5206**, **Attn: Disability Services**

Name & Title: _____

Address: _____

Telephone: _____

Fax and/or Email address: _____

Professional Signature: _____ Date: ____ / ____ / ____

Type of License: _____ License #: _____

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