

Cornell University

Student Disability Services

Cornell Health, Level 5

110 Ho Plaza

Ithaca, NY 14853

Phone: (607) 254-4545

Fax: (607) 255-1562

sds.cornell.edu

Emotional Support Animal Assessment Form

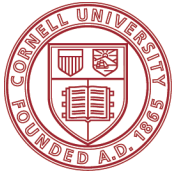
This form should be completed by the mental health care provider who is recommending that an emotional support animal (ESA) in the campus residential hall will be necessary in alleviating the identified manifestations of this student's disabling condition. To provide information about the student's disability, please also complete a [Mental Health Assessment Form](#).

The determination of reasonable accommodation is based on: (1) the individual has a disability; (2) the animal is necessary to afford the individual an equal opportunity to use and enjoy a dwelling; and (3) there is an identifiable relationship between the disability and the support the animal provides.

You can review Cornell University's [guidelines for requesting and keeping an Emotional Support Animal on Campus](#) on our website.

Thank you for taking the time to complete this form. If we need additional information, we may contact you at a later date.

We recognize that having an emotional support animal in the residence hall can be a 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 emotional support animal on both the student and the campus community.



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Please complete the following:

Today's Date: _____

Student Information

Student Name: _____ Cornell ID (if known): _____

Information about the Emotional Support Animal

Describe the animal you are prescribing (type of animal, description, age of animal):

What is the relationship between the clinical manifestations of the student's disability and the relief or assistance the animal will provide?

Describe other approaches or specific treatments that have been used. Please explain why the ESA approach is now considered necessary.

Is there evidence that an ESA has helped this student in the past or currently? If the student does not currently use this animal as an ESA, how has it been determined that the animal will specifically reduce or address symptoms of the student's mental health condition?

What consequences, in terms of disability manifestations, may result if the accommodation is not approved? What alternative accommodations might be explored if this housing accommodation is not approved?

Practicalities of Keeping an Emotional Support Animal

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 have any questions or concerns about the student's ability to carry out these responsibilities?

If this ESA accommodation is approved, will you be providing ongoing therapeutic monitoring/management of this treatment approach?

Certifier Information

Clinician Name: _____

Clinician Signature: _____

Medical Specialty: _____

License/Certification #: _____

Address:

E-mail: _____ Phone: _____

Office Information

Student Disability Services at Cornell University

To return form or ask questions:

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