

EMOTIONAL SUPPORT ANIMAL ROOM/SUITEMATE ACKNOWLEDGMENT

By my signature below, I understand that I will share the common areas of my assigned residential space with another student, as well as, the animal approved by this agreement. Should I have any concerns regarding the care and control of the approved ESA, I will respectfully discuss my concerns with the approved ESA's owner. If the owner and I cannot reach an agreement, I will contact the Area Coordinator for Residence Life to try to resolve the concerns and will bring these concerns to the attention of the Office of Residence Life and/or Residence Life staff for further mediation or intervention as needed.

I am aware that the ESA is working with its student partner and I will observe the following etiquette:

- I will avoid touching the animal or its owner without permission.
- I have no known allergy to this type of animal.
- I will not make noises at the animal as it may distract the animal from doing its job.
- I will not feed the animal as it may disrupt its schedule.
- I will not attempt to startle or distract the animal.
- I will not attempt to separate the animal from its owner.
- I will refrain from asking my roommate about any disability or the assistance the animal provides.
- I recognize students with animals exempt from the no pet policy may not want to talk about very personal matters, including diagnoses, and/or treatment.
- I will refrain from gossip or discussion with others related to my roommate's disability or accommodations. If the owner shares medical or disability-related information, I will treat the information as I would any personal information shared in confidence and will only share it on a need-to-know basis (e.g., emergency situations, or if a professional attention or intervention is necessary).

| House: | | |
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| | nates/apartment share approval: | |
| Name: | Student ID: | |
| Signature: | | |
| Name: | Student ID: | |
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| Name: | Student ID: | |
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