

Acknowledgement and Release of Information Consent Form

By my signature below, I verify that I have read, understand and will abide by the requirements of the William Paterson University Assistance Animal Policy.

I understand that if I fail to meet the requirements set forth in the Policy, WPU has the right to remove the Assistance Animal and I will be nonetheless required to fulfill my housing, academic, and all other obligations for the remainder of the housing contract.

I further give permission to the Accessibility Resource Center and /or their designee to disclose to others impacted by the presence of my Assistance Animal (e.g. Residence Life staff, potential and/or actual (s)/suite(s)mate(s) that I will be living with an animal as an accommodation. I understand that this information will be shared with the intent of preparing for the presence of the Assistance Animal and/or resolving any potential issues associated with the presence of the Assistance Animal.

I further recognize that the presence of the Assistance Animal may be noticed by others visiting or residing in university housing and agree that staff may acknowledge the presence of the animal, and explain that under certain circumstances Assistance Animals are permitted for person with disabilities.

Student Signature

Date

ARC Representative

Date

Residence Life Representative

Date