

**Middle Georgia State University
Animal/Owner Registration Form**



Name _____

MGA ID # _____

Home Address _____

Primary Ph# _____

Email _____

Do you have a disability as defined by the ADA? Yes No

Is this animal a service animal? Yes No

Is this animal a support animal? Yes No

Is this animal a comfort animal? Yes No

Is this animal trained to perform a task related to your disability? Yes No

What task(s) does this animal perform?

- _____
- _____
- _____

Name of animal _____

Is this animal certified through an agency? Yes No

Name of Agency _____

Contact Person _____ Phone Number _____

____ I understand the above information to be true. Any changes to this information will require a new registration.

____ I have read and agree to abide to the MGA Working Animal Policy.

Signature _____ Date _____

**Middle Georgia State University
Office of Residence Life Registration Form**



Name _____ Date _____

MGA ID # _____

Home Address _____

Primary Ph# _____

Email _____

Please check one of the statements

____ I am requesting to have an animal and have it live in my residence hall room.

____ I am requesting to train a Service Animal and have it live in my residence hall room.

If campus address is known, please provide:

Building _____ Unit/Room _____

____ I understand the above information to be true. Any changes to this information will require a new registration.

____ I have read and agree to abide to the MGA Working Animal Policy.

____ I agree to pay the \$250 damage deposit for my residence hall room.

Signature _____ Date _____

Middle Georgia State University
Service, Support, Comfort Animal/Roommate Agreement



I understand that all roommates/suitemates must agree to allow the approved animal to reside within the living unit. Therefore, it is necessary to obtain permission from all persons living within the apartment. By signing this document, I am agreeing to allow the animal to reside in the unit I share with its' owner.

I understand that _____ is requesting an accommodation to the housing agreement for an animal. As a roommate of the owner of the animal, I agree to allow the animal to reside within my living space.

Roommate's Printed Name _____

Roommate's Signature _____ Date _____

Roommate's Printed Name _____

Roommate's Signature _____ Date _____

Roommate's Printed Name _____

Roommate's Signature _____ Date _____

Roommate's Printed Name _____

Roommate's Signature _____ Date _____

Departmental Approval:

Director of Residence Life _____ Date _____



Middle Georgia
State University

Approval Form

Name of Animal

Name of Owner

Student ID Number

Telephone Number

Date of Submission

The Owner of the animal has knowledge and agrees to be in compliance with all policies and procedures pertaining to having an animal on the campus of Middle Georgia State University and has been informed of their responsibilities in caring for the animal while on campus.

Initials

The Owner is aware that each semester, the animal has to be registered by the Office of Disability Services (ODS) in order to be on property. Failure to comply with this request or any stipulation set forth in the Working Animal Policy will result in the removal of the animal from the property.

Initials

By signing this form, the Office of Disability Services (ODS) has approved the animal to be on the campus of Middle Georgia State University. The animal is registered with the Office of Disability Services (ODS) and can be issued a MGA identification card.

Initials

Name of Disability Provider _____

Signature of Provider _____

Date _____