Information about Emotional Support Animals (ESA) in Campus Housing

Chapman University recognizes that living on campus and being in school can be stressful for students. The University maintains a “no pets” policy in the residence halls and apartment communities. However, in accordance with applicable law, the University will consider requests for accommodations to housing policy to allow students equal access and use of Chapman University housing.

Our residence halls and apartment communities are generally not appropriate for animals. The communal living of university housing requires the institution to consider the comfort and concerns of all students in residence. Therefore, Chapman University offers some important guidance for those who are considering making a request for an ESA. (Note: ESAs are not permitted in Chapman housing until the accommodation request has been made and acted upon.)

1. Students seeking to bring an ESA to University housing must have a verifiable disability and need for an emotional support animal. You will need to provide documentation of your disability and the associated need for an ESA from a health provider who knows and understands your limitations and can explain how the presence of the animal may help assist with your living conditions. This documentation should be in a letter or statement from your healthcare provider. There will need to be an identifiable relationship between your disability and the assistance the ESA provides to you.

2. It is important to note that the University may approve your request to have an ESA, but not approve the specific animal you were hoping to bring. For example, reptiles and rodents may be rejected because of safety and health concerns, and animals that threaten others or adversely impact the comfort and habitability of the environment may not be permitted in University housing.

3. ESAs are generally restricted to the student’s immediate living space, e.g. their residence hall room or bedroom within an apartment and common areas in their residential building, other than for natural relief. They are typically not allowed in other residential buildings, either in common areas or inside other resident’s rooms. Moreover, the ESA must be contained (caged or crated) any time the student is not in the room.

4. The ESA may not be left in the care of other residents. If the student leaves campus overnight, the ESA must be taken along.

5. Students bringing approved ESAs to campus are fully responsible for the animal’s behavior and for any damage done. If the ESA is disruptive to the living environment for others (e.g., barking or other loud noises, or significant odor from litter boxes or cages), and the behavior is not changed, a student may be held responsible for a violation of the student conduct code. If the behavior continues, or if there is any significant damage done to University property by the ESA, the ESA will need to be removed from the premises. The student will be held responsible for paying for any property damage.

6. Approval for an ESA does not guarantee a single room in residence. A student with an ESA will more than likely have a roommate or roommates.

7. If a student’s ESA request is conditionally approved, Residence Life and First Year Experience will work with the student to notify all roommates/suitemates/apartment mates of the presence of
the ESA in the residence. In situations where roommates, suitemates, and/or apartment mates of the owner object to living with the approved ESA, Residence Life and First Year Experience will work with all involved parties to find a mutually agreeable resolution. Such a resolution may require that one or more students change room assignments.

8. ESA accommodations will be reviewed each year. Students must provide sufficient documentation to have their accommodations renewed for another academic year.

9. Where possible, requests for ESAs should be received by the University at least 30 days before the student intends to move into Chapman housing or begin utilizing the requested accommodation. Immediacy of need will be considered on a case-by-case basis.

Emotional Support Animals may be permitted in Chapman University housing on a case-by-case basis. Prior to bringing an ESA into housing, the requesting student must first be familiar with the ESA guidelines in this document, submit a Student ESA Request form, submit a Physician Request form, and meet with a member of the Office of Residence Life and First Year Experience staff to go over and sign the Owner Responsibility Confirmation form.

Documentation from your health care provider should follow these guidelines:

- Documentation is provided by a qualified medical provider. A qualified medical provider is a medical or mental health professional licensed in the state of the student’s permanent residence or in the state of California.
- Includes verification of the individual’s disability and documentation of an identifiable relationship between the disability and the assistance the animal provides to help afford the student with an equal opportunity to use and enjoy University housing.
- Documentation supports that no other mitigating measures or accommodations would sufficiently provide the requesting student with equal access to Chapman University housing.
- Documentation is provided at least once per year.
Chapman University ESA Student Request Form

Student Information

First Name: _________________________________  Last Name: _________________________________
Chapman ID: ________________________________  Date of Birth: ________________________________
Chapman Email: _______________________________________________________________________

Animal Information

Name: _____________________________________  Species and Breed: __________________________
Date of Birth: _______________________________  Date of most recent vaccination: ______________
Veterinarian: ________________________________  Phone: ___________________________________
Address: _____________________________________________________________________________
City, State, Zip: ________________________________________________________________________

☐ Please attach a copy of current vaccination records and a photograph of the ESA to this form.

Please respond to the questions listed below as completely as possible.

1. What physical or mental impairment(s) do you have that impact one of your major life activities and caused you to request an ESA? What is the nature and severity of this impairment?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

2. Will the ESA assist you in utilizing University housing?  Yes / No  (circle one)

3. If your answer to question 2 is “yes,” in what ways will the requested ESA assist you in utilizing University housing? How is the requested ESA necessary for you to use and experience your living space?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
                                                                                           
                                                                                           
                                                                                           
                                                                                           
                                                                                           
                                                                                           


4. Why are you requesting this particular animal as your ESA?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

5. Understanding that an ESA is generally a housing-only accommodation, are you able to properly care for an ESA while engaged in typical college activities and/or residing in campus housing? Please explain.
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

6. Describe any potential challenges or concerns regarding your ESA living with you on campus and your plan(s) for addressing those challenges.
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

7. Please identify 2 people, not living on campus, who will be able to care for the ESA in the event that you experience an emergency, or in the event you are unable to care for the ESA as outlined in our policy. (They must be able to pick up the animal within 2 hours of notification)

Name: ________________________________ Phone Number: ________________________________
Name: ________________________________ Phone Number: ________________________________

Student Signature: __________________________ Date: __________________________

Filling out and submitting this form is not a guarantee for approval. You may not bring an ESA into Chapman housing until you have an official approval, have met with a Residence Life and First Year Experience staff member, and have signed and agreed to the ESA responsibility confirmation.
Chapman University Physician Request Form

PHYSICIAN REQUEST FOR INFORMATION Re: Emotional Support Animal

TO BE COMPLETED BY THE STUDENT

Student’s Name: _____________________________    Chapman ID: ______________________________

Re: Proposed ESA (if identified):

Name: _____________________________________
Type of animal: ______________________________
Age of animal: _______________________________

TO BE COMPLETED BY PHYSICIAN/SPECIALIST ONLY

The above-named student has indicated that you are the (physician, psychiatrist, mental health worker) who has suggested that having an Emotional Support Animal (ESA) in the residence hall will assist the student in utilizing and enjoying housing at Chapman University. So that we may evaluate the request for this accommodation, please answer the following questions:

Information About the Student’s Disability (A person with a disability is defined as someone who has “a physical or mental impairment that limits one or more major life activities.”)

1. What is the nature of the student’s disability (that is, how is the student limited)?
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________

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.)

2. 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?
   ___________________________________________________________________________________
3. Is there evidence that an ESA has helped this student in the past or currently?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

4. What consequences, in terms of the student’s ability to utilize University housing, may result if the accommodation is not approved?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

5. This student was provided with a copy of the guidelines surrounding the presence of an animal in residence in Chapman University housing. Have they shared the guidelines with you? Yes / No

Thank you for taking the time to complete this form.

We recognize that having an ESA in the residence hall can be a real benefit for someone with a disability, 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:

Chapman University
Office of Residence Life and First Year Experience
1 University Drive
Orange, CA 92866

You may also scan and email the document to reslife@chapman.edu
Provider Information

Name:

Address:

Telephone:

Email address:

Professional Signature:

License #:

Date:
Student Responsibility Confirmation

MUST BE COMPLETED WITH A RESIDENCE LIFE and FIRST YEAR EXPERIENCE STAFF MEMBER PRIOR TO MOVE IN

Guidelines for Maintaining an Approved ESA at Chapman University

(Please initial each item, indicating your understanding and agreement)

A. Care and Supervision:

Initial

_____ 1. I agree that the care and supervision of the animal are my responsibility, as the individual who benefits from the ESA’s presence.

_____ 2. I understand that the ESA must be contained within my assigned residential area (room, suite, apartment) and common areas within my residential facility at all times, except when transported outside the private residential area in an animal carrier or controlled by leash or harness. I understand I am always required to maintain control of the animal.

_____ 3. When I am not in the residential area, I understand that the ESA must be safely approachable by university personnel and appropriately secured in my room or bedroom (e.g. where necessary, a crate, carrier, standard cage, bedroom door secured, etc.). This will allow Residence Life and First Year Experience staff routine access to the residential facilities for maintenance and other routine tasks without posing risk to the animal.

_____ 4. If I am away overnight, I understand that I may not leave my ESA in my room/apartment without being present. My ESA must be taken with me if I leave campus overnight or during break periods.

_____ 5. I understand that I am required to clean up after and properly dispose of the animal’s waste in a safe and sanitary manner.

_____ 6. I agree that I am responsible for any expenses incurred for cleaning above and beyond a standard cleaning, or for repairs to University premises caused by the ESA, that are assessed after I move out. I understand that the University has the right to bill my student account for unmet obligations.

_____ 7. I agree that Chapman University staff shall not be required to provide food, care or any additional space for the ESA. This includes, but is not limited to, removing the animal during an emergency evacuation for events such as a fire alarm. Emergency personnel will determine whether to remove the animal and may not be held responsible for the care, damage to, or loss of the animal.

B. Animal Health and Well-being

_____ 1. Vaccination: In accordance with local ordinances and regulations, I understand that the ESA must be immunized against diseases common to that type of animal. I agree to share health and vaccination records with the Office of Residence Life and First Year Experience.
2. Health: I understand that the ESA must be in good health. Animals to be housed in Chapman Housing must have an annual clean bill of health from a licensed veterinarian, and Chapman University reserves the right to request this documentation. The University has authority to direct that the animal receives veterinary attention. Animals (where appropriate) must be spayed or neutered prior to being brought to campus.

3. Leash: I understand that if appropriate, the ESA must be on a leash, harness, or in a cage, when being transported through the building.

4. I agree that I am responsible for the cost, care, and supervision of the ESA including compliance with any laws pertaining to animal licensing, vaccination, and owner identification.

5. I agree that I am responsible for ensuring the safety of an approved ESA and the University community. If it is suspected my ESA is being neglected, mistreated, or has been abandoned, the University may contact Animal Control and the ESA may be removed.

C. Guidelines for Residence Hall Living:

1. I understand that I am responsible for assuring that the ESA does not unduly interfere with the routine activities of the residence or cause difficulties for students who reside there. I understand that I am also subject to disciplinary action via the Chapman University Student Conduct process if the ESA causes disruptions within the community.

2. As owner of the ESA, I understand I must comply with all university rules regarding noise, safety, disruption, and cleanliness.

3. I understand I am financially responsible for the actions of the ESA including bodily injury or property damage. My responsibility covers, but is not limited to, replacement of furniture, carpet, window, wall covering, and the like. I will be expected to cover these costs at the time of repair and/or move-out.

4. I understand that Chapman University is not responsible for the care of my ESA during fire drills and/or emergency preparedness procedures.

D. Removal of Approved Animal

The student may be asked to remove the ESA from University facilities if the student or ESA fails to comply with the above guidelines. The following describes behaviors which may result in the removal of the animal:

1. Disruptive Behavior: My ESA may be removed if its behavior is unruly or disruptive (e.g. barking, jumping on people, growling, running around, and exhibiting aggressive behavior). If such behavior persists, I understand I may be prohibited from bringing the animal on campus until I take significant and effective remedial steps to mitigate the animal’s behavioral problems. I may also be held responsible for violations of the Student Conduct Code.

2. Uncleanliness: I understand my ESA is required to be housebroken. I also agree to keep my ESA cleaned and well-groomed. Animals that are excessively unclean (e.g. repeated soiling of facilities, flea infested, foul-smelling and/or shedding excessively) may be excluded from University facilities.
3. I understand that my residence may be inspected for fleas, ticks, or other pests once a semester or as needed. The applicable housing office for the residence hall will schedule the inspection. If fleas, ticks, or other pests are detected through inspection, the residence will be treated using approved fumigation methods by a university-approved pest control service. I understand that I will be billed for the expense of any pest treatment above and beyond standard pest management in the residence halls.

E. Damage

1. I understand I am solely responsible for any damage to persons or University property caused by my ESA. Chapman University is not responsible for loss, damage to, or death of the ESA.

I have read and understand my responsibilities as an Emotional Support Animal Owner as outlined above. Should I fail in my responsibilities, I understand my approved accommodation may be suspended and/or I may be charged with a violation of student policies.

Student Signature: ___________________________ Date: _____________________________

For internal office use:

Received and Reviewed by RLFYE Representative: _____________________________

Date: _____________________________

Building: ___________________________ Room Number: ___________________________