

## Animal Related Program Registration Form

Per the [UConn Animals on Campus Policy](#), those wishing to bring animals not defined as Service Animals or Emotional Support Animals into controlled spaces must receive advance permission. Such animals may include therapy animals that are part of an established program with defined parameters. These programs must be administered by trained staff and require the full review, approval and oversight of the Provost's Office or the Vice President of Student Affairs, or their designees.

This registration form must be completed by the Program Director, or designee, for consideration at least one week prior to the commencement of any animal related program on University property. A completed form may be submitted via email to the Office of Institutional Equity at [equity@uconn.edu](mailto:equity@uconn.edu) or in-person at 241 Glenbrook Road, Unit 4175, Storrs, CT 06269-4175. For questions regarding this registration form, please contact the Office of Institutional Equity at (860) 486-2943 or [equity@uconn.edu](mailto:equity@uconn.edu).

### General Information

<b>Program Title</b> <i>(if applicable)</i>	
<b>Requested by</b> <i>(Department Name or Individual)</i>	
<b>Program Director</b> <i>(Name of primary responsible staff)</i>	
<b>Other Staff</b> <i>(List other individual(s), including any external staff, managing the program)</i>	
<b>Location of the Program</b> <i>(department, building name, campus, room number, etc.)</i>	
<b>Date(s) and Time(s) of the Program</b>	
<b>Number of and types of animals participating</b>	

### Program Purpose/Objectives

<b>Please describe the purpose/objectives of the program</b>
<b>Please describe the training staff have received, including any applicable certifications, to support the purpose/objectives of this program</b>
<b>Please describe the training the animals have received that support the purpose/objectives of this program</b>

## Contact Information

Please provide further information identifying the individual(s) and department responsible for this program along with their contact information. Contact information of the company or vendor (if applicable) must also be provided.

<b>Program Director Name and Contact Information (email, phone)</b>	
<b>Sponsoring Department and Contact Information</b>	
<b>Contact information for external individuals / company or vendor involved in the program (Include the company/vendor name and individuals' contact information while on University property)</b>	
<b>Name and contact information of Individual on-site to address any questions or issues.</b>	

## Agreement Terms

The University retains full discretion to revoke program approval at any time.

The animal(s) must be supervised and staff must retain full control of the animal(s) at all times while on University property.

The animal(s) may not be left unattended at any time on University property.

The Program Director is responsible for compliance with state and local laws concerning animals (including registration, vaccinations, and tags), for controlling the animal(s), for cleaning up any waste created by the animal(s), and for any damage caused by the animal(s) to individuals or property while on University property.

Access to University property may be restricted or revoked under the circumstances outlined below. Restrictions or exclusions will be considered on a case-by-case basis. The University reserves the right to remove or exclude an animal from University property if:

1. The animal poses a direct threat to health and safety
2. The staff does not maintain control of the animal, including but not limited to during any interactions with other animals
3. The presence of an animal fundamentally alters a University program
4. Improper/Inadequate care of the animal is exhibited, including if the animal is not housebroken
5. Damage or harm is caused by the animal
6. The presence of the program or animal are disruptive to research, instruction, or other University business

In such situations, Public Safety may be contacted to assist in the removal of the animal.

## Acknowledgement

I hereby acknowledge I have read and agree to the terms of this registration form and assume the responsibilities of operating this program within the defined parameters listed above.

\_\_\_\_\_  
Program Director (or Designee)

\_\_\_\_\_  
Date

\_\_\_\_\_  
**OIE OFFICE ONLY:** Reviewed By

\_\_\_\_\_  
Date