

**Emotional Support Animal Procedure Acknowledgment and Information Form**

This form must be submitted and approved prior to animal occupying the assigned space.

Resident Name \_\_\_\_\_ Animal Type \_\_\_\_\_

Emergency Contact for Animal (Name and Phone): \_\_\_\_\_

Animal's Breed \_\_\_\_\_ Animal's Name \_\_\_\_\_

Most Recent Rabies Vaccination Date: \_\_\_\_\_ (Record must be attached)

Spayed or Neutered (Date Confirmed): \_\_\_\_\_ (Record must be attached)

**DOGS:** Most Recent DHLPP Vaccination Date: \_\_\_\_\_ (Record must be attached)

**DOGS:** Most Recent Bordetella Vaccination Date: \_\_\_\_\_ (Record must be attached)

**DOGS:** Most Recent Influenza Vaccination Date: \_\_\_\_\_ (Record must be attached)

**CATS:** Most Recent FPV/FVRCP Vaccination Date: \_\_\_\_\_ (Record must be attached)

**I acknowledge having read the Emotional Support Animal Procedure and agree to abide by its terms and conditions. I understand as the animal owner, I am responsible for timely providing updated vaccine records in the future, or University staff can require the animal's removal from campus facilities.**

\*City of Houston [Municipal Code 6-86](#) requires registration so that anyone who owns, keeps, possesses, or has control of a dog or cat four months of age or older in the City of Houston must have their pet registered, vaccinated against rabies every year, and microchipped. I understand I must provide proof of city animal registration for any dog or cat **within 30 days of move-in**.

\_\_\_\_\_  
Signature of Resident

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name SHRL Apartment /Room

\_\_\_\_\_  
Signature of Director

\_\_\_\_\_  
Date