



2019 Service Dog Application

*If applicant is a minor, please fill out the following information with parent's information.

****You MUST remit the application processing fee of \$75 or your application will not be reviewed.**

Client Name(s): _____

Address: _____

City, State, Zip: _____

Social Security #: _____

Phone: _____

E-Mail: _____

Occupation(s): _____

Annual household income: _____

____ Married ____ Single ____ Divorced ____ Other: _____

Photo of the person: Please attach a photo of person receiving the dog ***Required**

Statement of disability: Please attach a physician's statement of the disability explaining the disability and how the disability affects you (or your child). ***Required**

Name of person receiving the service dog (if different from name above): _____

Age of person getting the Service dog: _____

What is the disability? _____

What is the prognosis? _____

Has person applying for this service dog applied for a service dog from any other organizations? _____

If yes, please list organizations applied to: _____

Has person applying for this service dog been turned down by another service dog organization? _____

If yes, please tell us why. _____

Does the person getting the service dog smoke? _____ Take illegal drugs? _____ Drink alcohol? _____

How many family members in the home? _____

Please list family members living in the home:

Adults

_____	Age _____
_____	Age _____
_____	Age _____
_____	Age _____

Children

_____	Age _____
_____	Age _____
_____	Age _____
_____	Age _____
_____	Age _____

List any medications applicant is on: _____

How have they improved/not improved with treatment? _____

What is the mental level of the applicant? _____

Are they capable of caring for their own dog or is someone going to help them? (Family, Aid, Nurse, etc. for example) _____

Is everyone in the family aware that they must work with the dog and it must listen to them as well as the handicapped handler? _____

Does the applicant have any fear issues we need to know of? _____

Anxiety attacks? _____ Panic attacks? _____

What is the family lifestyle? (Hiking, hunters, fishing, 4-wheeling, couch potatoes, for example) _____

Does everyone in the family agree to and want a service dog? _____

If not, then explain why they are in disagreement: _____

Do you plan to move within the next 12 months? _____

This dog is to be kept: (Circle answer) Totally inside / Totally outside / Inside and outside

Does anyone in the household have known allergies to Dogs? _____

Are you looking for a specific sized dog? _____ If yes, please explain: _____

Do you have a securely fenced yard? _____ If yes, what kind? _____

How tall is the fence? _____ feet

How many pets do you currently own? _____ Please list type (cat, dog, etc), age, breed, sex (include if spayed/neutered) and any training they have received: _____

Are all pets in your household current on their vaccinations? _____

Are all pets altered (spayed/neutered)? _____ If not, why? _____

Name of Veterinarian: _____

Are any pets in your household diagnosed with infectious diseases or viruses? _____

How many dogs have you owned in the last 5 years? _____

Where are they now? _____

Have any of your dogs ever displayed “dominant, aggressive, or fearful” behaviors? _____
If yes, please list those behaviors for each dog and explain what happened and tell us where the dog is now:

Have you or are you willing to pay for and attend obedience classes for your dog? _____

Where will the dog sleep at night? _____

How many hours each day will your dog spend alone?
On weekdays? _____ On weekends? _____

Please list **3 non-family** references, 1 of which should be your veterinarian:
*If you do not currently have a veterinarian, please list a 3rd non-family reference.

1. Name, how do you know this person?, phone number:

2. Name, how do you know this person?, phone number:

3. Name, how do you know this person?, phone number:

I affirm that the above information is correct:

Signature

Date

Pawsibilities Unleashed reserves the right to refuse certification of any Service Dog if the dog does not meet their expectations and guidelines for a Service Dog.

Please print, fill out and mail to:
Pawsibilities Unleashed
P.O. Box 5316
Frankfort, KY 40602

*Make sure to include your \$75 application processing fee and all required documentation with your application.
Your application will not be processed without your processing fee and documentation.

F/1
FO: Original