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Emotional Support Animal Emergency Contact Agreement

It is the intent of Siena University to provide an environment that fosters respect and dignity towards all students. For students with documented disabilities, Siena strives to provide reasonable accommodations, including an Emotional Support Animal (ESA).

Please read the [Emotional Support Animal Policy](#) and the [Emotional Support Animal Housing Agreement](#).

You have been listed an Emergency Contact for _____ ESA while they are at Siena. Please read and sign the below agreement.

I, _____, residing at, _____ understand the Office of Community Living, the Office of Accessibility or another University representative will communicate with me regarding the above students' ESA at this phone number _____.

I understand that I am required to come to campus within 3 hours if I am called to take (remove) the animal.

I understand that is the above named student is not able to take care of their ESA due to hospitalization, illness, travel etc. I will be called and required to remove the animal from campus until the student has returned to campus and can continue the care for their ESA.

I understand that if the ESA is removed from Housing due to a violation of the ESA Policy or the ESA Housing Agreement that I will be called and required to remove the animal from campus.

I have read, understand and agree to the Emotional Support Animal Emergency Contact Agreement.

Signature

Date