Service Dog Application



All applicants must be age 21 or older

Personal Information

First name*: _____

Last name*: _____

Preferred Name: _____

Birthday*: _____

Address*:_____

Phone*:_____

Email*: _____

Dog Information

Dog Name: _____

Dog Breed: _____

Dog Age: _____

References

Please provide three references we may contact. References must be the age of 21 or older

First and Last Name:_____

Phone: _____

Address: _____

First and Last Name:_____

Phone: _____

Address: _____

First and Last Name:_____

Phone: _____

Address: _____

Requirements and Expectations

Have you ever had a Service Dog previously?

Yes No

What are you wanting your Service Dog to be trained to do for you?

_____

_____

_____

_____

_____

If you are unable to care for your service dog at any time do you have someone set up as an emergency contact who can care for them until you can?

Yes No

Emergency Contact

First and Last Name:_____

Phone: _____

Address: _____

First and Last Name:_____

Phone: _____

Address: _____

Transportation

Do you have reliable transportation to attend weekly training sessions for a period of ten to twelve months?

Yes No

Do you have reliable transportation to get out into public and practice homework two or three times a week?

Yes No

It is required that you attend three public access outings with Central Ohio Service Dogs during your training time to be eligible for graduation. They may be held on weekdays, evenings, or weekends. Can you commit to a minimum of three outings?

Yes No

We require a minimum of five volunteer hours where you will be required to volunteer in one of the needed areas before being eligible for graduation. Can you commit to this obligation if you are accepted into our program?

Yes No

Monthly Expenses Budget

Please fill out below your planned budget and expenses that you are prepared to offer to care for your dog. Please include an amount for an emergency fund should an emergency with your dog come up.

Food (Victor High Pro Plus): _____

Flea and Heartworm Protection: _____

Routine Wellness Visit (Annual Averaged): _____

Deworming: _____

Gas for Monthly Training Trip: _____

Monthly Emergency Fund: _____

Total Monthly Budget: _____

Return and Refund Policy

Many variables determine the potential success of this program including the owner's ability and effort; the dog's learning capacity, temperament, and ability to perform, the specific needs of the owner and many other unknowns. As such, the successful performance of any owner trained service dog cannot be guaranteed by COSD. No refunds, returns, or exchanges will be made on any monies sent to COSD for applications, training, evaluation or testing purposes. Sessions unused must be used within 12 months or they will go into our Scholarship Fund. If your training was fully funded and you graduate early the remaining sessions will be donated to another student and handler team in need. Any chargebacks we receive filed by you will incur a fee of up to 25% of the total the chargeback was filed for. There may be additional lawyer, court, and filing fees that apply.

I have read and agree to Central Ohio Service Dogs' Policies and Liability Documents

All policies, waivers, and conditions can be found on our website at Centralohiosd.com/policies

_____ _____

Signature Date

Please use this QR code to make your donation for evaluation.
Without completing this step, we cannot move forward with your evaluation.