

## University of Kentucky Roommate Agreement (Service/Support Animals)

By signing this form, I am indicating the following service or support anim		•
Name of Roommate:		(name of student requesting _ ESA)
Type of Animal:		
Physical Description of Animal (Bree	ed/Color):	
I agree to live in the residence with the for any damage caused by the anim any way my responsibility. I also un appropriate off-campus contact if the emergency:	al and that the care and safeld derstand the following individu	keeping of the animal is not in ual has been identified as the
Emergency Contact:		
I also understand that I can revoke t agreeing to live with the animal, I will a mutually agreeable housing resolu-	work with Residence Life and	9 .
Printed Name:		
Signature:		
UK Student ID:		
Date Signed:		
Residence Hall and Room:		
Email to: drc@uky.edu		
Mail to: University of Kentucky		

Disability Resource Center

Lexington, KY 40536-0082

407 Multidisciplinary Science Bldg.