

Emotional Support & Service Animals: Complaint Form



Person filing complaint Name (printed): _____

Email address

Contact number

Position (check one): ____ Faculty ____ Staff ____ Student ____ Other

What is your relation to the ESA Owner or Service Animal Handler (i.e., roommate, floor mate, etc.)

I have observed disruptive or threatening behavior by an Emotional Support and/or Service Animal on campus.

Date of complaint: _____ (must be submitted within five (5) days of occurrence.)

ESA Owner/Service Animal Handler, if known: _____

Location/Residential Community: _____ Room Number (if known): _____

Complaint:

