

Assistance Dogs in School Agreement

Use of an Assistance Dog by a student with designated low incidence special needs (e.g., Chronic Health Condition, Visual/Hearing Impairment, Autism Spectrum Disorder), in school or on District property, may be approved by the District when it has been determined by the District that it helps develop independence or when the student requires such use to have equal access to the services, programs or activities offered by the school, and when the District's criteria have been met to the satisfaction of the Board of Education.

"Assistance Dogs" include:

1. "Autism Support Dogs" which are dogs trained as assistants for persons with autism.
2. "Hearing Dogs" which are dogs that alert individuals who are deaf and/or hard of hearing to specific sounds.
3. "Seizure Response Dogs" which are dogs trained to provide emergency response for individuals with epilepsy.
4. "Service Dogs" (as defined in the BC Guide Dog and Service Dog Act) which are dogs trained to assist individuals who utilize a wheelchair.
5. "Guide Dogs" (as defined in the BC Guide Dog and Service Dog Act) which are dogs trained as a guide for a blind or visually impaired person.

Application

Prior to the admittance of an Assistance Dog to a school, a student's parent/guardian must:

1. Provide a letter to the District requesting Assistance Dog admittance. The letter must outline the benefits of having an Assistance Dog attend school with their child and include their plan for the care and supervision of the Assistance Dog while at school.
2. Provide a copy of the letter of recommendation from an appropriate professional confirming the diagnosis of a recognized special need, including a recommendation for the use of an Assistance Dog.
3. Provide a Certificate of Training for the Assistance Dog and the Handler from the appropriate agency.
4. Agree to pay for any additional costs incurred by the District and/or school related to the Assistance Dog (e.g., appropriate training for School District staff members, bus and/or classroom modifications).

5. Arrange for the personal care and physical needs of the Assistance Dog, including at least one bio-break procedure per day and providing appropriate bedding (e.g., bed or blanket) and water bowl.
6. Develop an alternative dog handler for instance when the primary dog handler is absent
7. Accept responsibility for the actions of the Assistance Dog by signing a District release of liability
8. Annually, provide the District with proof of a municipal dog license, proof of annual re-certification from the appropriate agency and proof of up-to-date vaccinations provided by a Doctor of Veterinary Medicine confirming that the Assistance Dog is in good health

Agreement

I agree to provide the district Annually with proof of a municipal dog license, proof of annual re-certification from the appropriate agency and proof of up-to-date vaccinations provided by a Doctor of Veterinary Medicine confirming that the Assistance Dog is in good health.

_____ Initial

I agree to pay for any additional costs incurred by the District and/or school related to the Assistance Dog (e.g., appropriate training for School District staff members, bus and/or classroom modifications).
I agree to provide to the district a Certificate of Training for the Assistance Dog and the Handler from the appropriate agency.

_____ Initial

I agree to arrange an alternative dog handler for instances when the primary dog handler is absent.
I am aware that I should contact the school for further information if I have questions or concerns about service dogs in schools.

_____ Initial



A world of opportunity

I agree to arrange for the personal care and physical needs of the Assistance Dog, including at least one bio-break procedure per day and providing appropriate bedding (e.g., bed or blanket) and water bowl.

_____ Initial

By choosing to allow my child to use a service dog at school, I will assume the risk of an accident occurring and agree that the use of service dog at school is suitable for my child.

_____ Initial

The Board of Education of School District 45 (West Vancouver) does not provide any accidental disability, dismemberment, medical expense or death insurance on behalf of students. The School District recommends that you check your family medical coverage or purchase the Student Accident Insurance which was made available at the beginning of the school year.

_____ Initial

In consideration of the West Vancouver School District permitting my child to be accompanied by a certified service dog at school, I waive any and all claims I may have against, and release from all liability and agree not to sue the Board of Education of School District 45 (West Vancouver) and its officers, employees, agents, volunteers and representatives, and the Ministry of Education for any personal injury, death, property damage or loss sustained as a result of my child's use of a service dog.

_____ Initial

Parent/Guardian printed name:

Parent signature

Date
