THERAPY DOGS

The Bethlehem Central School District (the District) supports the use of Social Service Dogs by teachers, other qualified school personnel, or qualified nonemployee volunteers (the Owner) for the benefit of its students, subject to the conditions of this policy.

A Therapy Dog is a dog that has been individually trained and certified to work with its Owner to provide specified services and functions to District students. Therapy Dogs, for the purposes of this policy, are not “service animals” as that term is used in the American with Disabilities Act or New York State law.

Therapy Dogs are the personal property of the Owner and are not owned by the District.

Nothing herein shall enlarge or abridge the right of any student, employee, or visitor to be accompanied on District property by his/her own service dog, to the extent required by federal or state law.

Nothing herein shall permit a student, employee, or visitor to be accompanied by his or her own comfort animal or emotional support animal for his or her own personal use or individual benefit on District property.

Therapy Dog Standards and Procedures

The following requirements must be satisfied before a Therapy Dog will be allowed in school buildings or on school grounds:

A. Requests:
   All individuals who wish to bring a Therapy Dog for the benefit of students to District property must submit a written application to the superintendent or his/her designee. A copy of the application is attached. The request must be renewed each school year or whenever a different Therapy Dog will be used.

B. Training and Certification:
   The Owner must submit one of the following: (1) Social Service Dog International Certification for Social Service Dogs; or (2) Therapy Dogs International Certification. The certification must remain current at all times that the Therapy Dog is present in any District school building.

C. Health and Vaccination:
   The Therapy Dog must be clean, well groomed, in good health, housebroken, and immunized against diseases common to dogs. The Owner must submit proof of current licensure from the local licensing authority and proof of the Therapy Dog’s current vaccinations and immunizations from a licensed veterinarian.

D. Control:
   A Therapy Dog must be under the control of the Owner through the use of a leash or other tether unless the use of a leash or other tether would interfere with the Therapy Dog’s safe, effective performance of its services for student.

   The Therapy Dog must not disrupt the educational process by barking, seeking attention, or engaging in any other disruptive behavior.

E. Identification:
   The Therapy Dog must have appropriate identification clearly indicating that it is a Therapy Dog.
F. Health and Safety:
The Therapy Dog must not pose a health and safety risk to any student, employee, or other person at school.

G. Supervision and Care of Therapy Dogs:
The Owner is solely responsible for the supervision and care of the Therapy Dog, including any feeding, exercising, and clean up while the animal is in a District building or on District property. The District is not responsible for providing any care, supervision, or assistance for a Therapy Dog.

H. Authorized Area(s):
The Owner shall only allow the Therapy Dog to be in areas in District buildings or on District property that are authorized by District administrators.

I. Insurance:
The Owner must submit a copy of an insurance policy that provides liability coverage for the Therapy Dog while in a District building or on District property.

Exclusion or Removal from School

A Therapy Dog may be excluded from a District building or District property if a District administrator determines any of the following:

1. The Owner does not have control of the Therapy Dog;
2. The Therapy Dog is not housebroken;
3. The Therapy Dog presents a direct and immediate threat to others in the District building or on District property; or
4. The Therapy Dog’s presence otherwise interferes with the educational process.

The Owner shall be required to remove the Therapy Dog from the District building or District property immediately upon such a determination.

Parent Notice

The superintendent or his/her designee shall ensure that parents are notified in writing prior to the Therapy Dog being permitted to enter a District building. Such notice may be electronic.

Allergic Reactions

If any student or school employee assigned to a classroom in which a Therapy Dog is permitted suffers an allergic reaction to the Therapy Dog, the Owner of the animal will be required to remove the animal to a different location designated by an administrator.

Damages to School Property and Injuries

The Owner of a Therapy Dog is solely responsible and liable for any damage to a District building or District property or injury to personnel, students, or others caused by the animal.

Adoption: August 9, 2017
Revised: February 8, 2018
Revised: October 17, 2018
Therapy Dog Request Form

Name of Owner: ________________________________

Mailing Address: ________________________________

Contact Number: ________________________________

Therapy Dog Breed: ____________________ Age: _______ Weight: _______ Color: _______

Name of Dog: ____________________________________________

Please provide a brief description of the services or functions the Therapy Dog will be providing: _______

_____________________________________________________________________________________

_____________________________________________________________________________________

School(s) visiting: ____________________________________________

Date(s) of visiting: ____________________________________________

By signing below, I am affirming that I have read and understand the Bethlehem Central School District’s Therapy Dogs policy. I will abide by the terms of this policy. I understand my Therapy Dog may be excluded from a District building or District property if any of the following occur (including, but not limited to):

1. If any student or school employee assigned to a classroom in which a Therapy Dog is permitted suffers an allergic reaction to the Therapy Dog;
2. The Owner does not have control of the Therapy Dog;
3. The Therapy Dog is not housebroken;
4. The Therapy Dog presents a direct and immediate threat to others in the District building/on District property; or
5. The Therapy Dog’s presence otherwise interferes with the educational process.

I understand I am responsible for any and all damage to District property or personal property, and any injuries caused by my Therapy Dog. I also understand that the District is not responsible for any costs related to my Therapy Dog. I agree to indemnify, defend and hold harmless the District from and against any and all claims, actions, suits, judgments and demands brought by any party arising on account of, or in connection with, any activity of or damage caused by my Therapy Dog.

The following documentation must be included with the request form:

1. Proof of annual vaccinations;
2. Documentation of state and/or city licensure of my Therapy Dog;
3. Social Service Dog International Certification, or Therapy Dogs International Certification; and
4. Proof of insurance.

Once approved, proof of notice to parents/guardians of school/class where the Therapy Dog will be required to be submitted prior to entering building.

Therapy Dog Owner Signature _______ Date _______ Superintendent Signature _______ Date _______