



Animal Visitor in the Workplace - Request Form

Applicant Name: _____ Date: _____

School/Site: _____ Class/Rm #: _____

Type of Animal: _____ # of animals: _____

Date(s) of visit to the school: _____

Are animal vaccinations up to date? Yes No N/A

(Proof of vaccinations is required. If no, animal will not be allowed into the building.)

What is the purpose of having the animal(s) visit the school? _____

I agree:

- to abide by the terms set out in Administrative Practice AP A2 Animal Visitors in the Workplace
- to take responsibility for the animal's actions and its care
- to ensure the animal is not left unattended at any time
- to confine the animal(s) to the assigned area
- to dispose of animal waste properly (securely bagged and removed to outside dumpster immediately)

Signature: _____ Date: _____

For Office Use

Met/determined impact: Yes No Request Approved or Request Denied

Principal/Site Supervisor _____ Date: _____

(signature)