

**Embrace A Vet, Paws for Peace  
Service Dog Training Application Form 2017**

**Veteran Information:** Please print as clearly as possible. Thank you.

Application Date: \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address: Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ Phone (cell) \_\_\_\_\_

Email \_\_\_\_\_

**DATES OF SERVICE: Please provide copy(ies) of DD214.**

Air Force \_\_\_\_\_ Army \_\_\_\_\_

Marines \_\_\_\_\_ Reserves (Branch) \_\_\_\_\_

Navy \_\_\_\_\_ National Guard \_\_\_\_\_

Coast Guard \_\_\_\_\_

**DID YOU SERVE IN A COMBAT ZONE(S)?** \_\_\_\_\_ **IF yes,**

**WHERE** \_\_\_\_\_ **AND WHEN?** \_\_\_\_\_

**Where** \_\_\_\_\_ **And When** \_\_\_\_\_

**HAVE YOU BEEN DIAGNOSED WITH, EXPERIENCED SYMPTOMS OF, OR BEEN TREATED FOR POST-TRAUMATIC STRESS (PTSD)?** \_\_\_\_\_

**HAVE YOU BEEN DIAGNOSED WITH, EXPERIENCED SYMPTOMS OF, OR BEEN TREATED FOR TRAUMATIC BRAIN INJURY?** \_\_\_\_\_

**IF Yes, BY WHOM?**

\_\_\_\_\_  
**ARE YOU CURRENTLY IN TREATMENT/THERAPY/COUNSELING? IF YES, PLEASE PROVIDE HIS/HER NAME** \_\_\_\_\_

**PLEASE PROVIDE A LETTER OF REFERRAL FROM YOUR PROVIDER, (SEE ATTACHED FORM LETTER TO BE COMPLETED BY THE PROVIDER) HAS LETTER BEEN PROVIDED?**

**YES** \_\_\_\_\_ **NO** \_\_\_\_\_

**DO YOU REQUIRE SPECIAL ACCOMMODATIONS FOR ANY PHYSICAL DISABILITIES? IF YES,**

**EXPLAIN:** \_\_\_\_\_

\_\_\_\_\_

**OTHER THAN PTS(D) AND/OR TBI, ARE THERE ANY OTHER PHYSICAL OR MENTAL HEALTH ISSUES AND/OR LIMITATIONS WE SHOULD KNOW ABOUT? YES \_\_\_\_\_ NO \_\_\_\_\_**

**EXPLAIN:** \_\_\_\_\_

\_\_\_\_\_

**WHY DO YOU WANT A SERVICE DOG?** \_\_\_\_\_

\_\_\_\_\_

**WHAT TASKS DO YOU WANT THE DOG TO PERFORM FOR YOU?** \_\_\_\_\_

\_\_\_\_\_

**GENERAL INFORMATION**

**Do you currently have a dog that you want to train as a service dog? Yes \_\_\_\_\_ No \_\_\_\_\_**

**If yes, what breed, age and size dog do you have (specify): Dog's Name:** \_\_\_\_\_

**Breed** \_\_\_\_\_ **Age** \_\_\_\_\_ **Size/Weight** \_\_\_\_\_

**If your own dog does not pass our trainer's evaluation and therefore not accepted into the program, are you willing to consider a second dog in your household that has the right temperament for service dog training and has been pre-evaluated by our trainers? Yes \_\_\_\_\_ No \_\_\_\_\_**

**If yes, what kind of dog (breed, size, temperament) do you envision having as a service dog using the information below as guidance \*?**

\_\_\_\_\_

\_\_\_\_\_

*\* Note: Not all breeds make good service dogs. We will advise you should the breed you describe not be a good service dog candidate and will be happy to suggest breeds that are appropriate. There are 14 breeds of dogs which appeared on virtually all of the uninsurable lists. Most of these blacklisted not only the specific breed but any mixed breed that presumably included a genetic relationship to one of the banned breeds. The 14 most often blacklisted dog breeds were:*

*Pit Bull Terrier, Staffordshire Terrier, Rottweiler, German Shepherd, Presa Canario, ChowChow, Doberman Pinscher, Akita, Wolf-hybrid, Mastiff, Cane Corso, Great Dane, Alaskan Malamute, Siberian Huskie*

**Other than the dog described above, do you currently have animals living in your household? \_\_\_\_\_ If yes, please list them including species, gender, breed, ages whether they are altered or any special issues:**

**Species**                      **Breed**                      **Gender**                      **Age**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list below all humans who live in your household, including their ages:

Name \_\_\_\_\_ Age \_\_\_\_\_

_____	_____
_____	_____
_____	_____
_____	_____

Are other people living with you agreeable to you owning a service dog? Yes \_\_\_\_\_ No \_\_\_\_\_

Is anyone in the household allergic to dogs? Yes \_\_\_\_\_ No \_\_\_\_\_

If you live alone, please include the name and contact information of 2 people willing to take care of your service dog should you become ill and are temporarily unable to care for the dog.

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

It is estimated the yearly costs for caring for a dog (food, supplies, veterinarian care and routine medical) are \$1200. And an emergency visit could be as much as \$1,000. Are you financially able to cover these costs?

Yes \_\_\_\_\_ No \_\_\_\_\_

A dog needs daily exercise with you as the new handler. Please describe the amount and type of exercise you are able to perform daily with a dog, and consistently (running, biking, walking), and which distance are you able to cover without difficulty:

\_\_\_\_\_

Briefly describe your living situation, i.e. house, apartment, available yard, fenced in, busy road? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you own or rent your current home? Own \_\_\_\_\_ Rent \_\_\_\_\_

If you live in an apartment or house that you rent, do you have permission from your landlord to have a dog? If having a dog is dependent on the dog being a service dog, you must realize the importance of completing the service dog training successfully. If you do not complete it successfully, your choice will be to move with the dog or give the dog up. This would be devastating to both you & dog. Please provide letter from landlord.

**Are you working? If yes, briefly describe what you do and your hours? Do you have written permission from your employer to take your service dog to work? Please include copy of letter if you have it.**

**If accepted into the service dog training program, you will be attending weekly, 2-hour training sessions for a total of 16 weeks. You will also be expected to log 100 additional hours of independent training using the training methods and tools you learned in class in order to complete the course. Beginning around the middle of the course, the classes will be held at various public places like a Home Depot, Walmart, a restaurant and or a mall. You and the dog need to learn how to behave in public situations. Only 2 absences during the training course are permitted.**

**Are you willing and able to make this considerable commitment?      Yes \_\_\_\_\_                  No \_\_\_\_\_**

**Other Comments:** \_\_\_\_\_

**How did you find out about this program?**

\_\_\_\_ Brochure      \_\_\_\_ Posted Flyer      \_\_\_\_ Website (Embrace A Vet)      \_\_\_\_ Veterans Helping Veterans Group  
 \_\_\_\_ Veterans Organization (VFW, DAV, AL, etc.)      \_\_\_\_ VA      \_\_\_\_ Vet Center

Attended EAV Retreat? \_\_\_\_\_ Spouse Attended EAV Caregiver Support Group? \_\_\_\_\_

\_\_\_\_ Other, including referral by someone, please identify: \_\_\_\_\_

Embrace A Vet Service Dog Training Course is a substance free event (other than prescribed medications). In addition, no weapons are permitted to be brought to the training class and by signing this application participants agree to these policies.

This service dog training course is FREE to participants. **A \$100 commitment fee is due 2 weeks prior to the first day of class, which is refunded at the successful completion of the course.** Once your application is received and processed, we will contact you for a personal interview.

By signing this application, I acknowledge and authorize representatives of Embrace A Vet to discuss this application with any representative of a Maine Vet Center or other referral organizations or agencies.

**VETERAN SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Return this completed and signed application with:**

- A copy of each of your DD214 s
- A statement listing a diagnosis of PTSD or TBI and of need for a service dog from your mental health care provider using the form letter attached.

To:    Embrace A Vet, Paws for Peace                      207-449-9149  
         Post Office Box 516                                      [info@embraceavet.org](mailto:info@embraceavet.org)  
         Topsham, Maine 04086                                  [www.embraceavet.org](http://www.embraceavet.org)