

Embrace A Vet
Paws for Peace Coordinator
Post Office Box 516
Topsham, ME 04086
207-449-9149
info@embraceavet.org

Practitioner Name

Street/PO Box

City, State

Zip

Phone

Email

RE: Paws for Peace Service Dog Training Program

Dear Practitioner, Embrace A Vet relies, in part, on your thoughtful completion of this referral form to guide us in making an informed decision on the appropriateness of this program for your client at this time. Thank you!

_____ is my patient.

Due to his/her diagnosis of PTSD/TBI, he/she experiences difficulties effectively coping with many daily life situations. To help alleviate these challenges and to enhance his/her day to day functioning, I recommend he/she have a service dog. The presence of this service dog will likely help mitigate the PTSD/TBI symptoms he/she is currently experiencing.

The EAV Paws for Peace program requires the veteran and untrained dog train together in a 16 week course that meets once a week for 2 hours and to participate in a 6 month follow-up phase. In addition, the veteran is required to train with their dog at home for a minimum of an hour each day in 10-15 minute segments and to keep a log of their training time/activity.

It is my opinion that my patient is mentally and physically capable of adhering to this rigorous schedule and that he/she is not currently showing signs and symptoms of drug and/or alcohol abuse. I also believe that he/she has the ability to refrain from using a punitive approach with the service dog and can follow the positive training techniques, as taught by the dog program trainers. And, I believe that my patient will be able to provide a safe and caring home for a dog.

Additional Comments?:

Sincerely,

(Practitioner's signature and title)

(Date)