



**Housing**

Willamette University, Matthews Hall, Salem, Oregon 97301  
T 503-370-6212 | F 503-370-6709 | housing@willamette.edu

**Emotional Support Animal Registration**

All Emotional Support Animals that enter residential buildings owned by Willamette University must be registered with Housing and Accessible Education Services. Registration is valid for the academic year and must be updated with current animal information at the beginning of each contract term. Proper registration requires verification of licensing (if applicable) and vaccination for the Emotional Support Animal. Proper identification is also required. **Please attach a picture of the animal and its crate.**

**Owner Information (please print):**

Owner Name: \_\_\_\_\_

Campus Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ WU Email Address: \_\_\_\_\_

**Emergency Contact/Alternate Caregiver of Animal (in case of emergency):**

Name: \_\_\_\_\_

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

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

**Emotional Support Animal (ESA) Information:**

Name of Animal: \_\_\_\_\_

Type of Animal: \_\_\_\_\_ Breed: \_\_\_\_\_

Description of Animal (include Colors/Markings): \_\_\_\_\_

Name of Veterinarian: \_\_\_\_\_ Phone Number: \_\_\_\_\_

License Tag Number (If Applicable): \_\_\_\_\_ Year: \_\_\_\_\_

Vaccination Schedule: Last date vaccinated: \_\_\_\_\_

Next immunization due by: \_\_\_\_\_

Has the Emotional Support Animal ever bitten or shown aggressive behavior towards people? If yes, please explain the circumstances.

\_\_\_\_\_  
\_\_\_\_\_

Owner's Name (please print): \_\_\_\_\_ ID: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return this form to Willamette University's Housing office, Matthews Hall.**