

**SUNY Delhi**  
**Office of Residence Life**  
**Pet Friendly Floor Application**

Please complete all the **required fields** \* to apply for the Pet Friendly Floor.

\*First Name: \_\_\_\_\_

\*Last Name: \_\_\_\_\_

\*Student ID: \_\_\_\_\_

\*Are you 18 years of age or older? \_\_\_\_\_ If no, a parent or legal guardian must complete this form.

\*Home Address: \_\_\_\_\_

\*School Email Address: \_\_\_\_\_

\*Cell Phone Number: \_\_\_\_\_

**Pet Information**

\*Name of Pet: \_\_\_\_\_

\*Species of Pet:  
\_\_\_\_\_

\*Breed: \_\_\_\_\_

\*Male or Female: \_\_\_\_\_

\*Has your pet been spayed/neutered? (yes or no) \_\_\_\_\_

\*Color(s)/Marking(s):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Weight (if a dog, it must be 80 lbs or less): \_\_\_\_\_

\*Animal's Age: \_\_\_\_\_

\*Number of Years you have owned the pet: \_\_\_\_\_

**Veterinarian Information (Who do you plan to use for veterinary care should the need arise when you are on campus?)**

\*Primary Veterinarian: \_\_\_\_\_

\*Veterinarian Office Address: \_\_\_\_\_

\*Veterinarian Office Phone Number: \_\_\_\_\_

If not a local vet, do you have transportation available to get your pet to their vet? Circle one choice below:

Yes, I have transportation.      or      No. I do not have transportation.

If YES to the question above, What type of transportation do you have? \_\_\_\_\_

**Pet Emergency Contact Information**

In the event of an emergency where you are not able to care for your pet, who can we contact to come get your pet? This cannot be a residential student.

\*First Name: \_\_\_\_\_

\*Last Name: \_\_\_\_\_

\*Email Address: \_\_\_\_\_

\*Home Phone number: \_\_\_\_\_

\*Cell Phone Number: \_\_\_\_\_

\*Relation to You (i.e. Parent, Friend ~~Mom, Dad~~):  
\_\_\_\_\_

**Pet Rehoming Information**

In the event of your removal from the Pet Friendly Floor at SUNY Delhi, where and with whom will your pet reside?

\*First Name: \_\_\_\_\_

\*Last Name: \_\_\_\_\_

\*Home Address: \_\_\_\_\_

\*Email Address: \_\_\_\_\_

\*Home Phone Number: \_\_\_\_\_

\*Cell Phone Number: \_\_\_\_\_

**\*Please answer the following question in detail:**

How will having your pet here at SUNY Delhi help you be successful in your academic pursuits?

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**\*Required Documents:**

Proof of Applicable Current Vaccinations (NYS Standard)

**ALL DOGS, CATS and FERRETS REQUIRE A CURRENT RABIES VACCINATION.**

DOGS: MUST have current DHLPP

CATS: MUST have current FVRCP

FERRETS: MUST have current DISTEMPER

Veterinarian Health Assessment dated within the last year

Veterinarian Behavioral Assessment

Proof of Flea/Tick Prevention Medication

Proof of Pet Insurance

**Acknowledgement & Assumption of Responsibility – Please Initial by each statement below:**

\_\_\_ 1. I acknowledge comprehensive financial responsibility associated with the presence of my pet.

\_\_\_ 2. I acknowledge my full personal responsibility for the actions of my pet.

\_\_\_ 3. I agree to participate in mandatory education programming associated with the Pet Friendly Floor.

\_\_\_ 4. I agree to provide flea and tick preventative for my pet and assume full responsibility for necessary remediation.

\_\_\_ 5. I agree to appropriately manage pet waste and to maintain a sanitary environment for my pet.

\_\_\_6. I agree to fully comply with SUNY Delhi's Pet Friendly Policy and any associated updates which will be received via the SUNY Delhi Email.

\_\_\_7. In the event of a dispute regarding my pet, I agree to fully comply with the determinations of the Office of Residence Life.

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Student Printed Name

Student Signature

Date

For Office Use Only:

App Received Date: \_\_\_\_\_

App Review by: \_\_\_\_\_

Vet Documentation Received Date: \_\_\_\_\_

Vet App Reviewed by: \_\_\_\_\_

Status:  Approved

Denied