



## **Student Trainer Application Packet**

Dear Prospective Student:

Thank you for your interest in The Foundation for Service Dog Support, Inc. (FSDS) Service Dog Training Program. Enclosed you will find the packet of application materials and instructions for completing your application. This packet contains the following:

- Student Trainer Application
- Personal Reference Forms
- Pick-up Authorization Form
- Notice of Costs
- Photo Consent Form
- General Release of Liability
- Notice of Privacy Practices
- Zero Tolerance Policy
- FSDS Code of Conduct

Please read all materials carefully prior to signing and submitting your application. Incomplete applications will not be processed. The FSDS will review all completed applications, and those candidates who are eligible will be contacted. If you have any questions, you are encouraged to contact me directly. We look forward to the opportunity to work with you.

Best wishes,  
Jessica Parker, Lead Trainer  
[jessica.parker@servicedogsupport.org](mailto:jessica.parker@servicedogsupport.org)  
623-200-9762



**Part I: General Information (to be completed by all applicants)**

Name of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

Home phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Email address: \_\_\_\_\_

Do you currently have a job?  Yes  No

If yes, where are you working? \_\_\_\_\_

Are you able to provide care for a dog where you live?  Yes  No

Do you have any other pets in your home?  Yes  No

If yes, the please specify number, type and breed \_\_\_\_\_

Is anyone in your home allergic to cats or dogs?  Yes  No

Are there any (other) children younger than 18 years old in your home?  Yes  No

If yes, please specify \_\_\_\_\_

\_\_\_\_\_

Have you, at any time, used illegal drugs?  Yes  No

Please list any community service that you have performed over the past 2 years.

\_\_\_\_\_

\_\_\_\_\_

It is important that the training program of a service dog is not disrupted. Are you willing to commit to training a dog for a minimum of 18 months?  Yes  No

Do you understand and agree that if you are applying to train an FSDS owned dog for someone in need, that at the end of the training period, you will be required to release the dog to the FSDS?  Yes  No

**Part III: Preliminary Screening (to be completed by all applicants who wish to be considered to raise a facility dog)**

1. Have you ever been arrested and/or convicted of a crime?  Yes  No  
If yes, please use the back of the paper to explain.
2. Are you willing to undergo urine drug testing, if required by the receiving facility?  Yes  No
3. Are you willing to be fingerprinted, if required by the receiving facility?  
 Yes  No
4. Are you willing to consent to a record check by law enforcement, if required by the receiving facility?  Yes  No
5. Are you willing to commit to any additional training that will be required for raising a facility dog, over and above that of raising a service dog?  Yes  No
6. Have you ever, past or present, experimented or used any illegal drugs or alcohol?  Yes  No  
If yes, please use the back of the paper to explain.
7. Have you ever been fired from a job?  Yes  No  
If yes, please use the back of the paper to explain.
8. Do you have transportation to and from an internship at a facility in order to complete your training hours, if chosen to train a facility dog?  Yes  No

**Part IV: Verification of information**

I, \_\_\_\_\_ hereby verify that the information I have provided above is accurate, up to date and true to the best of my knowledge. I understand that any falsification of information may be grounds for rejection of my application, or if accepted, expulsion from the training program.

\_\_\_\_\_  
Signature of student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent/guardian (if applicant is a minor)

\_\_\_\_\_  
Date

**Important:** The application will not be processed until all parts have been submitted. Please mail the completed application package to: FSDS, 5060 W. Olive Ave., Glendale, AZ



**Personal Reference Form** *(must submit two references)*

Name of Applicant \_\_\_\_\_

\*\*\*\*\*

To be completed by the person writing the referral. Thank you for taking the time to complete this reference for the above named student. We appreciate your contribution to the screening and selection process. Please be candid.

1. How did you become acquainted with this applicant?

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

2. Would you describe this applicant as a "team player"? Yes / No

3. What do you believe to be this applicant's greatest strengths?

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

4. What do you believe to be this applicant's greatest weakness?

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

5. Do you believe that this applicant has the ability to commit to an 18 month service dog training program? Yes / No

5. Do you have any additional comments? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Printed Name/Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Please mail this form **directly to the FSDS** at: FSDS, 5060 W. Olive Ave, Glendale, AZ 85302.



**Pick-Up Authorization Form** *(must be completed for all underage minors)*

To: Parent / Legal Guardian

The FSDS makes every effort to safeguard the youths enrolled in our training program. To this end, we will not permit any underage minor to be picked up from any session unless we have written authorization by the parent / guardian whenever this is practically possible. We duly note that in cases where the event has ended, we are unable to contact you and the youth states that the individual they intend to depart with is approved, we may be left with no choice but to permit this. Our staff is not authorized to transport underage minors in their personal vehicles and it is not reasonable for us to expect them to remain out in the community for indefinite periods of time until you may be available. In the event that there are any changes to the information that you provide below you must inform the FSDS *in writing* immediately using one of the following means:

A written and signed note carried by your son/daughter to be delivered to the lead instructor the day of the event; or an email sent to the Lead Instructor from **your** email account:

- [jessica.parker@servicedogsupport.org](mailto:jessica.parker@servicedogsupport.org)

In the event that your son/daughter attempts to leave with an unauthorized person and indicates to us that you have given permission, you will be contacted immediately at the phone number you have provided. Please ensure that the number provided is one where you are able to be reached. If we are able to speak with you to confirm that you have given permission, you will need to send an email to the teacher immediately. Remember that in order to release a student we require written permission.

Contact info for parent / legal guardian(s):

Name of Parent / Legal Guardian

#1: \_\_\_\_\_

Primary phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Secondary phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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

Name of Parent / Legal Guardian

#2: \_\_\_\_\_

Primary phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Secondary phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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

Please provide information on all individuals who are authorized to transport your son/daughter to and from events and field trips. Unless otherwise noted, the parent(s) / guardians(s) listed above are understood to be authorized by you. Individuals will be required to present a photo ID when picking up your son/daughter.

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

Relationship:  family  friend/ neighbor  classmate

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

Relationship:  family  friend/ neighbor  classmate

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

Relationship:  family  friend/ neighbor  classmate

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

Relationship:  family  friend/ neighbor  classmate

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

Relationship:  family  friend/ neighbor  classmate

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

Relationship:  family  friend/ neighbor  classmate

By signing this form, I hereby give permission to the FSDS to release my son/daughter from any training session or sponsored event to any above-named person(s).

\_\_\_\_\_  
Signature of parent / legal guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of parent / legal guardian



## Notice of Costs

The FSDS makes every effort to hold down the cost of our services so that we may provide maximum benefits to all who wish to participate. Nonetheless, there are some costs that will be associated with participation in this program. The FSDS does not charge tuition for the training, thus the costs listed below are understood to be in lieu of tuition.

### Up front training-related costs for recipients who are NOT military veterans or first responders:

- SD 101 Orientation Course / Online Didactic Training      \$250

### Canine-related expenses

- All student trainers are required to provide for the care of their service dog-in-training; this includes all non-FSDS covered expenses including but not limited to the cost of food, supplies such as grooming, exercise toys, bedding, food bowls and other essential canine needs. Covered veterinary care for FSDS owned dogs includes spay/neuter, routine vaccines and one-time hip x rays. The training is solely responsible at all times for any possible damages to FSDS property or the property of others.
- Student who are training an FSDS owned dog are required to submit a monthly expense log for all expenses they have incurred; each January the FSDS issues a donation letter for IRS purposes so that you may claim these expenses as a charitable contribution

### Incidental field trip costs include but are not limited to

- travel to local events
- food
- admission tickets to outings such as movies, museums, etc.

I understand and agree that costs are a necessary part of a training program and agree to accept responsibility for all costs as outlined. I further understand and agree that all durable items claimed as a tax deduction must be surrendered to the FSDS for transfer to the recipient upon completion of the program.

\_\_\_\_\_  
Signature of applicant (or parent/guardian if applicant is a minor)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of applicant or parent/guardian above



## Photo Release

**I understand and agree** that the FSDS will be photographing applicants, students and dogs, graduates and volunteers during training and events for the purposes of providing community education and/ or promoting the program. This may include still photos and/or videography. **I understand** that there may occasionally be TV stations and/or news reporters who may be present at classes and events to take footage and/ or photos of students and dogs for training and/ or publicity purposes. I hereby grant the FSDS permission to use these photos or footage, and grant permission to newspapers or TV stations to use these photos or footage for training and/ or publicity purposes. **I understand and agree** that all photos taken by the FSDS during the training are the exclusive property of the FSDS, and the FSDS reserves the rights to all such photos or videography.

\_\_\_\_\_  
Signature of applicant (or parent/guardian, if minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of applicant (or parent/guardian, if minor)





## General Release of Liability Statement

I \_\_\_\_\_ hereby release any liability(ies) or claim(s) in participating in any activities or services sponsored by the FSDS organization. I acknowledge that I assume the risks and responsibilities in such participation and hold the FSDS harmless for any injuries or liabilities incurred or sustained in my participation. It is understood and agreed that, by acknowledging and signing this release, I irrevocably, unconditionally and completely releases and forever discharges the FSDS, and all of its principals, officers, heirs, representatives, successors, subsidiaries, assigns, affiliates, shareholders, partners, employees, former employees, attorneys, insurers, and/or agents from any and all losses, demands, damages, obligations, liabilities, actions, causes of action, debts, suits, judgments and all claims of any kind or nature whether known or unknown, fixed or contingent, arising directly or indirectly from, as a result of or in connection with, or otherwise relating in any manner to any claims of liability, that were alleged, or could have been alleged, against the FSDS, and all of its principals, officers, heirs, representatives, successors, subsidiaries, assigns, affiliates, shareholders, partners, employees, former employees, attorneys, insurers, and/or agents, that may in the future develop from or be caused directly or indirectly from any actions causing such liabilities. I acknowledge that I provide this release voluntarily and knowingly.

\_\_\_\_\_  
Signature of Applicant (or parent/guardian, if applicant is a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Applicant (or parent/guardian, if applicant is a minor)



## **Notice of Privacy Practices**

FSDS program participants and volunteer staff are entitled to privacy of their personnel files. The only exceptions to this policy are cases where the participant is a minor, where prior express consent has been granted in writing, for the sharing of protected information or in cases where the FSDS may be required to share protected information as part of ongoing legal proceedings or investigations. The terms and conditions of our privacy policy are presented here for your information. Protected information includes but is not limited to any information in your personnel file including health information as well as attendance records, demographic data and all progress notes. **Please retain a copy of this document for your files.**

### **Privacy of Health Information**

The FSDS is required to maintain medical history forms as well as signed consent / non-consent forms for medical treatment for each program participant. In those cases where consent has been granted for medical treatment, the FSDS is authorized to share medical information about you with emergency health care providers, on a need to know basis. For the purposes of this discussion, the following terms are defined as:

*Treatment*: this means the provision, coordination and/or management of health care and related services by one or more health care providers. An example of this would be the disclosure of your Protected Health Information (PHI) to providers outside of the FSDS who are connected to your health care treatment.

*Payment*: this refers to reimbursement for any services that are related to your treatment, and also including but not limited to confirmation of coverage, billing services or collection services and utilization review.

*Health Care Operations*: this includes the business aspects of a medical practice, such as quality assessment/control, auditing functions, cost-management analysis and customer services. It is also understood that the FSDS may be required to disclose protected health information about you to nurses, therapists, students and other health care personnel who are involved in your care and treatment.

The FSDS will, from time to time, be requested to participate in ongoing research studies in the service dog industry. For the purposes of this research, the FSDS may release de-identified, aggregate data regarding our program participants.

## Legal authority to make health care decisions for minors or others

Usually, the health information rights for a minor are extended to the minor's parents or legal guardians. There are, however, exceptions to this rule. For example, some health care decisions may be provided for a minor without the consent of a parent or guardian under implied consent, in cases where a delay in treatment could have devastating consequences.

The FSDS may, without prior consent, disclose protected health information to carry out treatment, payment or health care options to a minor under the following circumstances:

- In an emergency treatment situation, if we attempt to obtain such consent as soon as is reasonably possible after delivery of such treatment;
- If we are unsuccessful in reaching the parent/guardian to obtain consent, or in cases where we are presented with a significant communication barrier and determine, in our professional judgment, that your consent to treatment is clearly implied by circumstances.

## Permitted use or disclosure of any information

- *To avert a serious threat to the health or safety of yourself or others-* in the event that any FSDS staff becomes aware of a credible threat that you (or your dependent) intend to cause harm to self or others, we will take the necessary steps to notify the authorities to prevent such threat from becoming a reality.
- *Student interns-* the FSDS reserves the right to share information, as needed, with students who are interning with the FSDS and may be required to supervise any activities in which you may participate. In the event that you object to information sharing with an FSDS intern, you have the right to object in writing to prevent the sharing of such information.
- *Photo releases* are obtained for all students, and all photos and/or videography that are obtained during your participation in any of our programs are the exclusive property of the FSDS. The FSDS reserves all rights to these photos/videography. In the case of students who change their mind and no longer wish to be photographed, you may submit a written notice of such decision and no further images will be obtained. All images taken prior to the date of this notice, however, continue to be the property of the FSDS and may be used for publicity or training purposes in accordance with prior written permission (per the terms of Photo Release form).
- *Military-* the FSDS may disclose your protected health information as required by military command authorities if you are in the armed services.
- *Workers Compensation-* the FSDS may disclose your protected health information if required by workers compensation or similar programs to the extent necessary in order to comply with laws relating to workers compensation or other similar programs that provide benefits for work-related injuries or illness, as established by law.
- *Public health entities-* as required by law, the FSDS may disclose protected information about you to the Arizona Department of Public Health in order to:
  - o Prevent or control disease, injury or disability;
  - o Report suspected child abuse or neglect;

- o Notify a person who may have been exposed to a disease or may be at risk of contracting or spreading a disease or condition;
  - o Notify the appropriate government authority if we believe that a client may have been the victim of abuse, neglect or domestic violence. We will only make this disclosure subject to certain requirements when mandated and authorized by law;
  - o Notify the appropriate authorities in cases where a program participant informs the FSDS that they are intending to harm, neglect or abuse self or others, In order to protect the other person and our client.
- Lawsuits and legal disputes- the FSDS may disclose protected information about you in cases of legal disputes to the extent that we are required to cooperate in any ongoing investigations.

The FSDS is required to inform you of our privacy policies as well as our legal duties as they pertain to your protected information. This notice is prepared and effective as of January, 1<sup>st</sup>, 2011 and we are required to abide by the terms and conditions of this notice. We are also required to provide you with written notice of any revisions that may occur during the time that you are involved as a program participant with the FSDS. If you believe that your privacy has been violated, you may contact one or both of the following departments:

The Foundation for Service Dog Support, Inc. (FSDS)  
5060 W. Olive Ave.  
Glendale, AZ 85302  
623-200-9762

OR

Office of Civil Rights; U.S. Department of Health and Human Services  
1301 Young Street, Suite 1169                      200 Independence Ave SW  
Dallas, TX 75202                                      Washington, DC 20201  
Phone (214)767-4056                      FAX (214)767-0432                      TDD (214)767-8940  
Toll free 1-877-696-6775

When contacting us, please provide us with as much detail as possible so that your complaint may be fully investigated without delay. You will not be penalized for the filing of any complaint.

**A signed copy of this page MUST be returned to the FSDS with the completed application packet. Please return this page only, and save the notice of privacy practices for your records.**

**RECEIPT OF PRIVACY PRACTICE NOTICE**

I, \_\_\_\_\_, acknowledge that the FSDS has provided me with a written copy of their privacy practices on this date of \_\_\_\_\_. I understand that information regarding program participants is privileged and will not be shared with anyone outside of the FSDS without my written expressed permission with the exceptions that have been noted in this document. I acknowledge and fully understand the information that has been presented to me in this document.

\_\_\_\_\_  
Signature of applicant (or parent/guardian, if applicant is a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of above



## **ZERO Tolerance / Anti-Discrimination Policy**

The FSDS maintains ZERO TOLERANCE for all of the following:

- Illicit substance abuse
- Discrimination based on race, color, religion, sex (including pregnancy, sexual orientation, or gender identity), national origin, disability, age, or genetic information.
- Bullying behavior
- Mistreatment of dogs

Credible proof of violation of our zero tolerance policy is grounds for immediate dismissal from the program.



## **The FSDS Code of Conduct**

The FSDS has established minimum standards for all individuals who elect to participate in any phase of FSDS programming. Individuals are expected to abide by FSDS standards at all times, for the duration of the time that they are affiliated in any way with the FSDS. These standards and rules are intended to provide a framework for individuals in order to ensure order, and maintain the integrity of all of our programs and services. This includes but is not limited to students, volunteers, staff and Board members. The standards are not intended to be a substitute for common sense and adherence to expected societal norms for morals and ethics. They represent a framework for rules and regulations. We remind everyone that rules and regulations we can teach, moral values are something that every individual needs to bring to the table. These standards are listed below.

### **GENERAL ORGANIZATIONAL STANDARDS**

#### **Honesty, Integrity And Public Presentation**

Individuals affiliated with the FSDS shall at all times:

1. Be courteous and respectful of the feelings and needs of those around them
2. Be supportive of those with special needs and offer assistance as needed
3. Be honest
4. Treat others as they would wish to be treated
5. Use appropriate language
6. Report any observed or suspected violations of the Code of Conduct to a supervisor immediately

#### **Dress Code**

Individuals who participate in FSDS sponsored public events shall:

1. Be clean, well groomed, and free of any offensive odors
2. Avoid use of perfumes and colognes as these may precipitate respiratory problems for individuals with chronic illness
3. Dress appropriately for the occasion; clothing must be in good repair; no torn jeans, low cut shirts, sheer blouses or crop tops
4. Wear their name badge at all times when working at an event
5. Employees shall wear FSDS issued uniforms at all public events unless instructed otherwise

#### **Moral and Ethical standards**

The FSDS has a zero tolerance policy for untoward behaviors and individuals who are affiliated with the FSDS shall at all times:

1. Refrain from bullying behavior and report any perceived incidences to a supervisor immediately
2. Refrain from use of illicit drugs
3. Arrive sober to all events and avoid use of alcoholic beverages when working at FSDS sponsored events
4. Treat others as they would wish to be treated

### **Interactions With FSDS Youths**

The FSDS operates a community-based training program, and all individuals who are affiliated with the FSDS must be aware at all times of the impact that their behaviors will have on impressionable young people who may be participating. Standards for interactions with FSDS youth members include the following:

1. At no time will a staff or volunteer member be alone with a youth; a supervisor with a current Class I IVP fingerprint clearance card must be present at all times
2. At no time shall any staff or volunteer transport an underage student for whom they are not the parent or guardian to or from an event in their personal vehicle without written permission of the parent/guardian and knowledge of a FSDS supervisor
3. Physical contact with a youth member, other than a traditional handshake, is strictly prohibited
4. Staff, students and volunteers are expected to be positive and supportive, and present our youth to the public in the best possible light at all times

### **Use of Proprietary Information**

The FSDS has worked hard to develop unique program materials for use in our programs. All individuals who elect to participate in any aspect of FSDS programming shall realize that access to any of our documents is a privilege, and along with this privilege comes responsibility. The federal government has enacted laws governing trade secrets, and infringement upon trade secrets is a federal crime (**18 U.S. Code § 1832 - Theft of trade secrets**). Arizona has enacted a similar law that makes theft of trade secrets a Class V felony (**A.R.S. 13-1820**).

The following rules apply to the use of any and all FSDS materials:

1. All documents are proprietary and at no time are individuals authorized to engage in any behavior that includes but is not limited to unauthorized verbal disclosure, downloading, scanning and uploading written materials, copying, transmitting or reproducing in any form or fashion any documents that belong to the FSDS.
2. For any individual who is assigned an FSDS email account either initially or at any time during their tenure with the FSDS, this account is the property of the FSDS, and the FSDS reserves the right at any time it shall be deemed necessary to access any or all email accounts or Drives.
3. Email accounts are to be used exclusively for the purpose of FSDS business, use of the FSDS email account or Drive for any other purpose is expressly prohibited.
4. At any time that a document is uploaded or created on the Drive by any program participant, shared edit privileges must be granted to the FSDS Executive Director.
5. At no time may any individual download or print documents from the Drive without written permission of the Executive Director.
6. At no time may any individual email FSDS materials to any non-FSDS email address.



7. FSDS materials may not be shared with others outside of the FSDS without expressed written permission of the Executive Director.

## **TRAINING AND TEAM STANDARDS**

### **Health, wellness and safety**

The handler shall provide:

1. Monthly heartworm treatments
2. Monthly flea and tick treatments if recommended by a Veterinarian
3. All required core vaccinations
4. Baths, brushing and grooming to keep dog clean and free of any offensive odors
5. Proper oral care
6. Regular nail trimming
7. Current County license tags that are prominently displayed on the collar
8. A name tag with a current phone number displayed on the collar
9. A clean program vest in good repair with ID badge and emergency contact card displayed in the pocket to be worn at all times while in public
10. Thermal working booties to protect against injury from excessively temperatures or sharp objects
11. Working equipment that is properly fitted and in good repair, including a collar, a leash that is no longer than 6 feet in length (retractable leashes are not permitted) and a harness (if applicable); backpacks are not permitted on the dog
12. Adequate food and hydration; must carry a portable water bowl when working

### **Training**

The dog shall be trained to:

1. Perform at least three discernible service related tasks to mitigate the disability of the handler
2. Obey commands on first attempt at least 90% of the time, except in cases of intelligent disobedience
3. Maintain a good heel on leash, harness, Halti or Gentle Leader
4. Lie quietly besides the handler or under a seat without creating an obstacle to others
5. Urinate or defecate only in appropriate designated places

The trainer shall:

1. Ensure that the selected service tasks are appropriate for the dog
2. Use only positive reinforcement techniques for service dog training
3. Be consistent in enforcing commands
4. Ensure that the dog is within two feet of them at all times except when a task requires a greater distance
5. Ensure that the dog has adequate space in order to avoid injury to the dog or others in public
6. Provide regularly scheduled rest breaks for the dog

## **Public behavior**

The dog shall:

1. Not solicit attention from strangers
2. Be able to work quietly in public without barking, whining or otherwise creating a distraction
3. Not growl, snarl or demonstrate any aggression towards people or other dogs
4. Not solicit or steal food items from the general public
5. Urinate or defecate only in appropriate designated places

The handler shall:

1. Set and enforce consistent boundaries
2. Respond politely and appropriately to public inquiries and challenges at all times
3. Maintain full control over their dog at all times
4. Remain alert for signs of danger and shall remove the dog from dangerous situations when necessary
5. Provide the dog with adequate food and hydration, but shall not feed the dog in designated public dining areas.
6. Provide regularly scheduled rest breaks for the dog

***Note: At all times, the sole responsibility for all aspects of care, training and public behavior of both team members rests with the handler.***



## Acknowledgement and Acceptance of Guidelines

I, \_\_\_\_\_, hereby acknowledge that I have received a full copy of the Code of Conduct of the FSDS. I understand and agree that the Training and Team Standards shall remain in effect for the working life of my team.

- I understand and agree to abide by all FSDS guidelines, as well as all rules and regulations of the FSDS during the time that I am in training with the FSDS. I understand and agree that if, at any time, I am found to be in violation of the FSDS Code of Conduct, I will be dropped from the program. I understand and agree that should this action become necessary, I am **not** entitled to a refund for any or all monies that have been paid up until that time.
- I understand and agree that should I have any questions regarding the standards and ethics, or rules and regulations as they have been presented in the applicant packet, I may contact the FSDS by phone at 623-200-9762 to speak with an authorized representative
- I acknowledge that I have reviewed the information presented to me and have no further questions. I understand the information as presented and agree to abide by the FSDS Code of Conduct. This includes the time I spend in training, as well as my working life with my FSDS service dog.
- I understand and agree that the standards pertaining to use of proprietary information shall remain in effect indefinitely. I am fully aware that unauthorized use or transfer of FSDS program materials constitutes criminal Theft of Trade Secrets under both federal and state statute. I affirm that I have read the laws in the links that have been provided to me in this document.

\_\_\_\_\_  
Signature of applicant (or parent/guardian if applicant is a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of applicant (or parent/guardian if applicant is a minor)