



Foothills Kiwanis Club of Boulder, CO
Alert Service Dogs (ASD) for Kids Academy
Academy Application Form



To become a candidate for enrollment in the ASD Academy that teaches families to train an Alert or Medical Response Dog for their afflicted child. Preferred recipient ages range from 8 to 14 years.

Foothills Kiwanis Club of Boulder, Colo. considers the information submitted in this application to be confidential and it Will be disclosed only to the Service Dogs for Kids selection committee and to the Club officers and Board of Directors.

1. _____ Yrs _____ M__ F__
 Child's Name Age Date of Birth Gender

2. Child's Disability ___ Diabetes ___ Allergy (to what _____)

Please describe child's condition including severity and ability to control with medication or other means. Attach additional supporting information, if necessary.

Are there any other conditions of the child which would adversely affect the child's ability to provide basic care for a dog (feeding, exercising, grooming, etc.)? ___Yes ___ No

If yes, describe how these needs would be met.

3. Name all adult parents/guardians residing with child:

Name	Employer	Position
Name	Employer	Position

4. Name(s) of parent/guardian who would become a member of the Foothills Kiwanis Club of Boulder, and regularly attend 1 hour training classes, twice per month in Boulder, Colo. or Denver, Colo. metropolitan areas.

5. Name all children or other residents of household

_____	_____	_____
Name	Relationship	Age
_____	_____	_____
Name	Relationship	Age
_____	_____	_____
Name	Relationship	Age
_____	_____	_____
Name	Relationship	Age

6. Type & breed of pets residing at household. Ages of pets If dogs, formal obedience trained? (Y,N)

Type (Dog, Cat, etc)	Breed	Age	
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Household dogs will be carefully evaluated during the home interview. The evaluation committee may judge that the presence of your dog(s) could interfere with effective puppy/child bonding, in which case, arrangements must be made for the subject dog to be absent for up to 4 months. Please describe how you would accomplish this temporary absence.

7. Residence:

___ Single Family home ___ Own ___ Rent
___ Condo/Town home ___ Own ___ Rent
___ Other Please describe _____

8. Will the home and work environment be such that the puppy will never be left home alone for more than 4 consecutive hours or more than a total of 20 hours per week? ___ Yes ___ No

9. How will dog be exercised and where will it relieve itself?

___ Fenced Yard
___ Other - Please Describe _____

10. Dog ownership experience of parent/guardian attending Academy training classes.

___ Currently own a dog
___ Have owned and cared for ___ dogs in the past
___ Have attended obedience classes with a dog

11. By submitting this application, the undersigned agrees that Foothills Kiwanis Club of Boulder may contact the following individuals. Further, the undersigned agrees to process information release forms, as necessary, to allow us to discuss this case with the following individuals:

_____	_____	_____
School nurse name	School name	Phone
_____	_____	_____
Child's Physician name	Physician's Facility	Phone
_____	_____	_____
Other individual(s) familiar with the child's condition (optional)		Phone

12. If the selection committee wishes, will you allow committee members to visit your home and to interview the child, all parents/guardians, and other individuals residing at your home?

_____ Yes _____ No

13. Do you live within 30 miles of Boulder, CO and/or are willing to attend twice monthly classes in the Boulder/Denver area and to visit the Project Trainer in Boulder when direct consultations are required?

_____ Yes _____ No

14. If selected to enroll in our Academy, one adult member of the Family must join the Foothills Kiwanis Club of Boulder. There are two membership levels available. The Regular membership dues are about \$50.00 per month, which gives the member full rights and privileges, and includes breakfast at all regular meetings and liability insurance covering the dog. There is also an Honorary membership with no dues, which entitles the member to attend any or all meetings, but the member will be charged \$10.00 for the breakfast meal. The liability insurance for the dog is included, but an Honorary member cannot vote or hold office. Please indicate your preference.

Regular membership _____

Honorary membership _____

15. How did you learn about us?

_____ ASD brochures

_____ Foothills Kiwanis Club website

_____ Project website—www.AlertDogs4Kids.org

_____ Member of ASD Academy

_____ Media information

_____ Other – Please Indicate _____

16. The principle contact regarding this application is:

Name (Please print)	Signature	Date
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Address	City	State	Zip
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Phone	Email
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Submit this application to:

Foothills Kiwanis Club of Boulder, CO

Attn: Linda McMullen

182 Anemone Dr.

Boulder, CO 80302

Questions – please send email to lbritton2149@gmail.com or phone 303-443-6408

For additional information, visit our website at www.AlertDogs4Kids.org