

# D'YOUVILLE UNIVERSITY

## Housing Accommodation Packet

D'Youville University provides housing accommodations in accordance with the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1978, and the Fair Housing Act to ensure equal access to programs, activities, and facilities.

The condition for which the request is being made must be documented by a qualified, licensed medical practitioner. The request is evaluated and is dependent upon the nature and the severity of the disability.

While the Americans with Disabilities Act requires that consideration be given to the specific methods requested by the student, it does not imply that an accommodation must be granted if it is deemed not reasonable, or if other options are available.

This packet covers the following accommodations and are specific to those students living in campus housing. Students must only submit the request(s) for which they are applying:

1. **Single-Person Dwelling**
2. **Meal Plan Waiver**
3. **Emotional Support Animal**

Questions regarding this application can be directed towards [housing@dyu.edu](mailto:housing@dyu.edu) or via phone 716.829.8451

Accommodation requests not outlined in this packet and/or not specifically related to campus housing should be directed towards the Office of Accessibility Resources.

### **Timeframe**

Students wishing to apply for placement in a single-person dwelling, hereinafter referred to as a "medical single", must have a completed D'Youville University **Medical Housing Application** submitted to the Office of Student Engagement & Housing by March 15th (for the following fall semester) and by January 3<sup>rd</sup> (for the following spring semester) for full consideration. Incoming First-Time in College Students must have their Medical Housing Application submitted by July 1 prior to their first semester. Applications received once an academic semester has started will be reviewed at the next review period. Applications must be submitted each academic year for consideration.

Students wishing to waive their meal plan must have a completed D'Youville University **Meal Plan Waiver Application** submitted to the Office of Student Engagement & Housing by the second Friday in August (for the following fall semester) and by the second Friday in January (for the following spring semester) for consideration. Applications received once an academic semester has started will not be reviewed. Applications must be submitted each academic year for consideration.

Students wishing to apply to have a support animal in their housing assignment must have a completed D'Youville University **Support Animal Application** submitted to the Office of Student Engagement & Housing second Friday in July (for the following fall semester) and by the second Friday in December (for the following spring semester). Applications received once an academic semester has started will be reviewed at the next review period. Applications must be submitted each academic year for consideration.

The application must be completed by an appropriate provider dependent upon the request you make and reason(s) for your request (i.e.: medical needs can only be recommended by a physician and/or medical specialist and psychological needs can only be recommended by a licensed mental health professional) and

must explain, in detail, the need for the accommodation as outlined in the specific application.

### **Process**

Accommodation applications will be evaluated by a committee comprised of members of the University's professional staff. Students must submit the attached '*authorization for release of information*' form to their diagnostician which will permit the application information to be reviewed and discussed by the committee members.

Committee decisions on residential accommodation applications will be based solely on the information provided, in writing, by the diagnostician. The University will not conduct outreach to outside offices for any further information or clarification on the student's condition.

Students granted a residential accommodation for the fall semester remain eligible for that accommodation through the end of the academic year. Students granted a residential accommodation for the spring semester, must reapply if they wish to retain their status for the subsequent academic year.

Students currently receiving a residential accommodation should not assume eligibility for upcoming academic years.

Residential accommodation application decisions will be emailed to the student at their D'Youville University email address.

Submission of a residential accommodation application, supporting documentation, and a diagnosis from a physician/licensed mental health professional does not guarantee approval of requested accommodations.

All decisions made by the review committee are final; there is no appeal of committee decisions.

### **Form Completion**

Your application must be completed by an appropriate provider dependent upon the request you make and reason(s) for your request (i.e.: medical needs can only be recommended by a physician and/or medical specialist and psychological needs can only be recommended by a licensed mental health professional) and must explain, in detail, the need for the accommodation as outlined in the specific application.

The diagnostician completing this application must have an established care plan and be an impartial individual who is not socially acquainted (e.g.: family, guardian, friend, etc.) with the student. The name, title, and applicable credentials of the qualified professional completing this application must be included on the '*authorization for release of information*' form.

Completed applications must be submitted to the Office of Student Engagement & Housing at D'Youville University directly by the diagnostician via email or post.

#### **Email Address:**

[housing@dyu.edu](mailto:housing@dyu.edu)

#### **Mailing Address:**

Office of Student Engagement & Housing  
D'Youville University  
320 Porter Avenue  
Buffalo, NY 14201

The student must leave the completed '*authorization for release of information*' form with the diagnostician to be included with their submission.

### **Medical Housing Application**

D'Youville University believes that shared living space is an integral part of facilitating the psychosocial

development of our students. Valuable skills are learned through this experience that can be useful throughout life. These skills include conflict resolution, adaptability, respect, compromise, and accepting the ideas and worth of students from diverse backgrounds.

The learning environment and residential living are central to the college experience. It should be noted that living within the community and learning to share space and be considerate of others is part of that learning experience. Therefore, requests for special housing accommodations based on a student's preference or desire for "privacy" and "quiet space" rather than need, or for a particular type of living environment/location are considered exceptions to this policy and will not be honored.

Additionally, by virtue of the shared facilities, resources, and number of people living under one roof, it is not reasonable to assume that having a single room would provide for privacy and/or a quiet, distraction-free space to any appreciable degree beyond living in a shared dwelling.

Students who have their D'Youville University Medical Housing Application approved will receive a medical single which is assigned by the Office of Student Engagement. This housing assignment is non-negotiable and is not eligible to be used in a room change process.

Students who opt out of their assigned medical single will forfeit their right to another medical single for that academic year. Students who have their D'Youville University Medical Housing Application denied will keep their assigned shared dwelling and will need to take part in the University housing selection process, as appropriate.

A medical placement may be assigned in a shared dwelling with other individuals who have similar medical needs.

### **Meal Plan Waiver Application**

Students looking to waive their meal plan should note that D'Youville University Meal Plan Waiver Applications are generally **not approved** for any of the following reasons: financial hardship, scheduling conflicts, religious reasons, vegetarian/vegan/organic diets, lactose intolerance, gluten intolerance, common food allergies, and/or food preferences.

Students with food allergies or specific requirements should contact the Director of Chartwells Dining Services before having a Meal Plan Waiver Application submitted. The University acknowledges that, in rare cases, a student may have a medical or dietary requirements that cannot be accommodated by Dining Services.

Dining Services is committed to assisting students with food allergy needs and is a member of the Food Allergy & Anaphylaxis Network's (FAAN's) College Network.

Students who have their D'Youville University Meal Plan Waiver Application approved, will have their meal plan charges canceled and removed from their student account. Students who have their D'Youville University Meal Plan Waiver Application denied will remain on the University meal plan and will be directed to the Office of Student Accounts/Solutions Center to ensure proper payments have been received.

### **Emotional Support Animals (ESA)**

Under the FHA, Assistance Animals, often colloquially referred to as Emotional Support Animals, are permitted within a student's residence/dwelling if they work, provide assistance, or perform physical tasks for an individual with a disability and/or provide necessary emotional support to an individual with a mental or psychiatric disability that alleviates one or more identified symptoms of an individual's disability.

Support animals are not considered 'pets' and several regulations are put into place if an animal is approved by the University to serve in this role. These regulations will be discussed, in detail, with the student during the animal registration process but one main point to note is that approved support animals must be contained within the assigned housing assignment at all times, except when transported outside the private residential area in an animal carrier or controlled by leash or harness. Students are encouraged to keep this in

mind when determining their support animal species, size, and specific animalistic needs.

Unlike a Service Animal, an Emotional Support Animal is not granted access to places of public accommodation, including areas where residents are normally permitted to go (e.g.: commons areas, student lounges, laundry facilities, dining halls, etc.). The animal is only permitted outside of the assigned room if the species needs outdoor access to eliminate waste and then is only permitted to exit the room on a leash and must return to the room immediately following the elimination of waste.

Emotional Support Animals are animals that are commonly domesticated. Animals such as a dog, cat, small bird, rabbit, hamster, gerbil, small rodent, fish, turtle, or other domesticated animal that is traditionally kept in the home for pleasure rather than for commercial purposes. Reptiles (other than turtles), domestic fowl, barnyard animals, monkeys, kangaroos, insects, and other non-domesticated animals are not considered common household animals. If the individual is requesting to keep a unique type of animal that is not commonly kept in households as described above, the individual will be required to demonstrate a specific disability-related therapeutic need for the specific animal or the specific type of animal.

Requests for an Emotional Support Animal request may be denied if: (i) allowing the animal would impose an undue financial and administrative burden or would fundamentally alter the nature of the residential facility; (ii) the specific assistance animal in question poses a direct threat to the health or safety of others that cannot be reduced or eliminated by another reasonable accommodation, or (iii) the specific assistance animal in question would cause substantial physical damage to the property of others that cannot be reduced or eliminated by another accommodation.

If approved, the student agrees to abide by all equally applicable University policies that are unrelated to the individual's disability such as assuring that the animal does not unduly interfere with the routine activities of the University's campus or residence halls including the reasonably ability of other residents to study, sleep, and quietly enjoy their living space.

The animal may never be left unattended overnight or for extended periods of time. If the approved student will be away from campus overnight or for an extended period, the animal may not be supervised or handled by any other student. D'Youville University personnel will not provide care or food for any animal including, but not limited to, removing the animal during emergency evacuation for events such as a fire alarm. Emergency personnel will determine whether to remove the animal and may not be held responsible for the care, damage to, or loss of the animal.

If approved, the University reserves the right to reassign the student to space to accommodate the student and the Assistance Animal if there is a potential safety or disability-related impact on the student's roommate(s), suitemates, and/or neighbors.

D'Youville retains the right to approve or disapprove the individual's ability to have an Emotional Support Animal in campus housing and considers other factors in determining whether the presence of an animal is reasonable in campus housing:

1. Is the housing space adequate to house the animal and, if applicable, its kennel/crate/cage?
2. Is the animal completely housebroken?
3. As appropriate, has the animal had its required vaccinations and are the vaccinations up to date?
1. Does the animal have a recent wellness certificate from a professionally trained animal health care provider?

Students with disabilities may use more than one Assistance Animal if the animals perform different tasks. Additional animals will not be permitted to provide companionship for approved Emotional Support Animals.

Students must present a recent veterinarian statement showing a clean bill of health for the animal. Animals may not be brought onto campus until necessary vaccinations have been administered. Animals too young to be vaccinated are not permitted on campus property. No animal may be kept in campus housing at any time prior to the student receiving approval as a reasonable accommodation. Individuals found with unauthorized animals in campus housing will be required to remove the animal and will be subject to disciplinary actions per University policy.

Students who have their D'Youville University Support Animal Application approved will register their animal with appropriate staff offices, discuss the animal with any applicable roommates, and move their animal into their housing assignment.

Students who have their D'Youville University Support Animal Application denied will not be permitted to have a support animal in their housing assignment will be directed to the 'pets' section of the Student Handbook for further details and animals that are permitted in the residence halls.

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## Medical Housing Application

All of the following questions must be answered as clearly and in-depth as possible by a physician/licensed mental health professional (dependent upon the student's condition).

**Answers must be typed, numbered, and submitted along with the student's signed 'authorization for release of information' form with diagnostician credentials.**

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1. Please document the medical or psychological circumstances that would necessitate a single-person dwelling to ensure student success. Your response must include the date of diagnosis and accompanying ICD-10 codes.
2. Please document the severity of these circumstances with specific examples to:  
Academic Functioning  
Social Functioning  
Activities of Daily Life
3. How long has this student been your patient? Your response must include all dates seen (including this evaluation visit) and frequency of appointments.
4. Please specify any medications that the student is prescribed for their condition. Your response must include the dosage and date of prescription.
5. Please document why treatment (e.g.: medication, counseling, therapy, equipment, etc.) does/will not allow symptoms to be ameliorated to the extent that the student can live in a shared dwelling. Your response must include specific interventions that have been tried and their associated outcomes.
6. Please specify your treatment goals with this student.
7. How would living in a shared dwelling hinder one or more of the student's major life activities?
8. What is the likelihood of student success should the student live in a shared dwelling?
9. Is there any additional information that you believe the University should know about this student before deciding on this Medical Housing Application.

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## Meal Plan Waiver Application

All of the following questions must be answered as clearly and in-depth as possible by a physician/licensed mental health professional (dependent upon the student's condition).

**Answers must be typed, numbered, and submitted along with the student's signed 'authorization for release of information' form with diagnostician credentials.**

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1. Please document the medical circumstances that would necessitate waiving the University meal plan in order to ensure student success. Your response must include the date of diagnosis and accompanying ICD-10 codes.
2. Please document all medical and dietary restrictions.
3. How long has this student been your patient? Your response must include all dates seen (including this evaluation visit) and frequency of appointments.
4. Please specify any medications that the student is prescribed for their condition. Your response must include the dosage and date of prescription.
5. Please document why D'Youville University Dining Services cannot meet the student's medical or dietary needs.
6. Please specify the student's alternative plan for meals and how long this plan will be necessary for.
7. Is there any additional information that you believe the University should know about this student before deciding on this Meal Plan Waiver Application?

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## Emotional Support Animal Application

All of the following questions must be answered as clearly and in-depth as possible by a physician/licensed mental health professional (dependent upon the student's condition).

**Answers must be typed, numbered, and submitted along with the student's signed 'authorization for release of information' form with diagnostician credentials.**

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1. Please document the medical or psychological circumstances that would necessitate an Emotional Support Animal to ensure student success. Your response must include the date of diagnosis and accompanying DSM-5 codes.
2. Please document the severity of these circumstances with specific examples to:  
Academic Functioning  
Social Functioning  
Activities of Daily Life
3. How long has this student been your patient? Please indicate the frequency of appointments and the last date that the patient was seen not including this evaluation visit.
4. Please document why treatment (e.g., medication, counseling, etc.) does/will not allow symptoms to be alleviated to the extent that the student can successfully live on campus without an Emotional Support Animal. Your response must include specific interventions that have been tried and their associated outcomes.
5. How would living without an Emotional Support Animal hinder one or more of the student's major life activities?
6. What is the likelihood of student success should the student live in the Residence Hall without an Emotional Support Animal?
7. Is there any additional information that you believe the University should know about before deciding regarding an Emotional Support Anim

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## Authorization for Release of Information

**Student Last Name:**

**Student First Name:**

**Student ID#:**

**Email:**

**@dyu.edu**

I hereby authorize D'Youville University and its designees to receive information from the below listed physician/medical specialist/licensed mental health professional regarding any information contained within my completed residential accommodation application.

I understand that I need to complete this form and submit it to my physician/licensed mental health professional for my residential accommodation application to be submitted and reviewed.

I understand that the information released from my records is confidential and that I have the right to cancel this permission at any point before the information is released.

**Student Signature:**

**Date:**

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**Attestation to be completed by physician/medical specialist/licensed mental health professional**

**Diagnostician Name:**

**Diagnostician Signature:**

**Diagnostician Title:**

**Diagnostician License Number:**

**Office Address:**

**Phone Number:**