

Assistance Dog Training and Assessment: application form

Thanks for your interest in training with us towards achieving assistance dog status with your dog.

The form below will provide us with a brief introduction to you, your dog and your goals for including your dog in the role of working with you as an assistance dog in the community. This information enables us to ensure we are assisting you and your dog in the best way possible. Through this information we are able to ascertain your needs, your current situation and supports as well learn all about your dog you're hoping to have as your assistance dog so that we can determine they will be a good match to your needs in an assistance dog.

Please fill out the information below to the best of your knowledge. This application process will also include an in-person assessment of suitability for training as an assistance dog and handler team. Undertaking this assessment process does not in any way guarantee you that you will be suitable to begin the training process following the assessment, nor that throughout training you will not be deemed as unsuitable for continuing on to complete a Public Access Test to achieve full accreditation.

Please also note that all the information provided in this form is kept private and confidential. No information will be shared with any external parties without your permission and only if it is essential in providing you the required services and supports. Any information gathered is only in order to provide you with the best and necessary service to achieve your goals of your dog becoming your assistance dog.

You will be required to also attach to this application a copy of a letter from your treating clinician or medical professional describing the diagnoses relevant and the expressed need for an assistance dog to help improve your functioning and access to community. A medical clearance letter is also required to be attached from your treating veterinarian ensuring that your dog is physically healthy enough to work as an assistance dog for you. Please ensure both of these documents are attached to your application. Once we receive your application you will also be forwarded a terms and conditions page and manual outlining the process of being an assistance dog and handler team.

Your name:	Date of application:
Address (residential):	
Phone number:	

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Email:
Date of birth:
Are you: Male / Female / Non-binary / Other
Have you been a member of:
Police / Fire service / Ambulance / Armed forces / None
Are you:
Employed full time / Employed part time / Unemployed / Student / Homeless
Other (please describe)
Emergency contact: Name: Contact: Relationship to you:
Alternate handler if required or if a child handler:
Your dog's name:
Dog's breed(s):
Dog's age:
Dog's height at withers:cm Dog's weight:kg
Microchip Number:
Council registered with:
Desexed: Y / N If yes, age when desexed:
If no, do you understand that before being able to conduct your PAT your dog will be required to be desexed under the Guide, Hearing and Assistance Dog Act? Yes / No
Does your dog have pet insurance?
If yes, who with?
Do you have funding support to assist with expenses for your dog if needed?

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If so, who with?
Are you aware that an assistance dog requires ongoing funding for maintaining regular training sessions between public access tests as well as health/medical expenses among many other costs?
How long have you owned your dog?
Where does your dog sleep? On your bed / In your room on floor / In another room / Outside / Other
Please describe how you became guardians for your dog (i.e. purchased directly from breeder, adopted from rescue, rehomed privately etc):
Has your dog had a recent veterinary visit and is in good health? Y / N
If no, please discuss any acute or chronic conditions you are aware of with your dog. This can include both physical, psychological, gut health such as allergies etc.
(Please note you'll need a vet check to ensure they're deemed physically capable of working within a therapy role).
Do you have any other dogs at home? ☐ Yes ☐ No Please describe below:
Do you have other pets such as cats? Rabbits? □ Yes □ No
If yes, what type(s):
Are you applying for your dog to be a (please circle):
Medical alert dog / Hearing dog / Assistance Dog (physical) / Psychiatric Assistance Dog / Autism Assistance Dog / Other (please describe):
Do you require only emotional support roles/tasks at home and DO NOT require public access?
NO I DO NOT require public access / YES I DO require public access
Who do you live with currently? Please include ages and relationship to you.

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Are these individuals who will look after your dog should you need to be away from them whether for hospital stay or other needs? Yes / No
If not, who will be looking after your dog in the case of an emergency?
Do you have any physical impairments that you are wanting an assistance dog for?
Yes / No
If yes, please describe your diagnosis, symptoms of this disability:
Please describe the types of tasks that an assistance dog could do to alleviate symptoms of your disability: Please note if you have balance or gait problems and wish to have your dog assist with
these, please discuss below. Not all dogs will be suitable for this given the physical pressure on the dog and the toll this can take. Also it will depend greatly on the breed/size of dog etc.
Do you have any physical impairments which may impact in your ability to train and/or handle your dog?
Yes / No
If yes, please describe:
Do you have seizures, diabetes or any other acute illnesses you want your dog to alert to?
□ Yes □ No
Do you have any psychiatric diagnoses that you aim to have your dog assist with?
□ Yes □ No
If yes, please list your diagnosis/diagnoses below.

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Please describe key symptoms of diagnoses that most greatly impacts your functioning (e.g. anger, mood, panic attacks, disordered eating, self-harm. dissociation etc).
How long ago were you diagnosed with the above and how long have you experienced the symptoms?
What tasks and supports do you envisage your future assistance dog doing to improve your functioning and daily life?
Have you previously had an assistance dog? □ Yes □ No
If yes, what for and was it through another organisation? Please describe details below including when you had the dog and what they did for you.
Training and behaviour history of your dog you wish to have as your assistance dog:
Has your dog undergone any previous formal training? ☐ Yes ☐ No
If yes, please discuss where this was done and to what level: -
Has your dog been conditioned to a marker (i.e. 'yes'/clicker)? \square Yes \square No
Can your dog toilet appropriately when invited? ☐ Yes ☐ No
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, ,	g enter a building polite				
	walk while maintaining a		•		
, ,	greet people politely with	, , , , ,	·		
Does your dog	take food gently from pe	opie? ⊔ Yes	□ No		
Is your dog co	mfortable with stairs?		□ Yes □ No		
Is your dog comfortable on a variety of surfaces?			□ Yes □ No		
Can your dog ignore the presence of another dog?			□ Yes □ No		
Is your dog co	mfortable with loud nois	ses?	□ Yes □ No		
Does your dog bark at wheelchairs, scooters?			□ Yes □ No		
Can your dog cope with separation from you?			□ Yes □ No		
If you drive, do	oes your dog travel cal	mly in a car? □] Yes □ No		
Do you use pu	ıblic transport? □ Yes	□ No			
If you do use p	oublic transport, has yo	our dog ridden (on public transp	oort before? □ Yes □ No	
Please circle al	I of the cues below that y	your dog is fluer	nt in:		
Sit	Down/drop	Come	Mat/bed	Stay	
Leave it	Stand	Say hi	Look/watch	Wait	
Give	Heel	Fetch/retrieve		Out/off	
List any additio	nal cues your dog knows	: :			
	ment do you use with you			uch)? 	
What equipmer	nt do you use on your do	g while walking,	training and wor	king?	
Shock collar □ © Laura Mun	Harness (back Martingale □ Other □ Please descri dy Assistance Dogs	Slip collar/lead ibe:	□ Correc		

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Have you done any public access work already with your dog already? \square Yes \square No
Does your dog already perform any tasks to assist you? This could include body blocking in queues at an ATM for example? $\ \square$ Yes $\ \square$ No
If your dog does perform tasks already, please describe what these are below: Please note that in order for your dog to be classified as an assistance dog it is a requirement that they perform a minimum of three tasks for you.
Please note that the presence of any of the below behaviours may mean your dog could not be suitable for work as an assistance dog.
Please answer as honestly as possible and give information about the context of when the behaviour occurs:
Does your dog show any aggressive behaviour including barking, lunging, snapping, biting, growling etc at other dogs or people? \square Yes \square No
Does your dog display any resource guarding behaviour? \square Yes \square No
Does your dog experience any obvious signs of stress/anxiety, compulsive behaviours, or inappropriate urination? \Box Yes \Box No
If you answered yes to any of the above, please discuss the context and severity of the behaviour below:
Are you aware that the process of training to conducting a Public Access Test may take up to 12 months and cannot be rushed or brought forward for any reasons including needing to fly somewhere? \square Yes $ \square$ No
Are you aware that having an assistance dog in public identifies you as having a disability and can draw attention from the public including asking questions? \square Yes \square No Do you feel comfortable managing this? \square Yes \square No

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Are there any additional comments you would like to make about your dog or your goals for training as an assistance dog?
As a requirement of applying for assistance dog assessment of suitability, you have read the terms and conditions provided on our website. They can be found here: https://www.lauramundydogtraining.com.au/terms-conditionsprivacy Please ensure you have read
these and agreed to them before signing below.
Any application fees are made payable before our assessment session. On receipt of this application you will be billed a fee payable of \$250 that will be made before we have our session.
Please don't hesitate to ask any questions at all before submitting your application if you are unsure about any of the information above.
Sign:
Print name:

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