

(Privately Trained) New or Renewal Application for Service Dog Team Certificates



This form is for service dogs that have been trained privately. Use this form if your dog was **NOT** trained by Assistance Dogs International or International Guide Dog Federation and you are applying for **NEW** Service Dog Team Certification, or you are **RENEWING** your Service Dog Team Certification. Service dogs that have been privately trained will also need to pass a service dog assessment.

Please ensure the appropriate sections of this form are completed. Do not leave blanks, as this form will not be considered if it is not completed. Please complete this application form and mail it to:

Department of Justice, Service Dog Program, PO Box 7, Halifax NS B3J 2L6 (c/o: Public Safety and Security Division)

Or you may drop it off at our office at **1681 Granville Street, Joseph Howe Building, Ground Floor, Halifax.**

The following must be submitted with a **NEW** application:

- A Medical Form, completed by a physician or nurse practitioner, confirming the requirement for a service dog. A Medical Form is available on the website or by contacting our office.
- A Veterinary Form to show proof of dog health, including your dog's date of birth, proof of spay/neuter, assessment of good health and current inoculations. A Veterinary Form is available on the website or by contacting our office.
- Coloured photograph of the applicant and dog taken together within the last three months. The image must be a close-up passport format. See photography specifications on website.
- Copy of government issued photo identification (e.g. driver's licence)

Once the application package is complete and all required documentation received, you will be notified of a date/time for your service dog assessment. There is a fee associated for the service dog assessment.

Direct questions to: Department of Justice, Service Dog Program
Phone: 902-424-8805 or toll free 1-888-760-5577 (#6)
Email: servicedogs@novascotia.ca
Fax: 902-424-0700

- NEW** Complete parts 1, 2, 3, 5 and 6
- RENEWAL** Complete parts 1, 2, 4 and 6 and submit a photo of you and your service dog

Part 1 Applicant Information

Name _____
Surname Legal Given Middle

Mailing Address _____

City/Town Province/Territory Postal Code

Date of Birth _____ Tel. _____ Email _____
yyyy/mm/dd

- Yes, I have attached a photo of myself and my dog.
- Yes, I have attached a copy of my government issued photo ID.

Part 2 Parent/Guardian Information *(Secondary Handler for Service Dog, if applicable)*

Name _____
Surname Legal Given Middle

Mailing Address _____
City/Town Province/Territory Postal Code

Date of Birth _____ Tel. _____ Email _____
yyyy/mm/dd

Part 3 Dog Information for NEW Applicants

Service Dog _____
Name Date of Birth (yyyy/mm/dd) Breed

Colour/Markings _____ Gender Male Female

I have attached the Veterinary Form that my dog has been spayed or neutered, assessment of good health and current inoculations.

Part 4 Dog Information for Renewal

Name of Service Dog _____

- I confirm I still require the service dog's assistance for daily living.
- I have attached written confirmation that my dog and I have successfully completed the Service Dog reassessment within the last 90 days.

Part 5 Training History

Provide as much information as you can with regard to your dog's training history and team training. Complete the section which applies to your specific training.

A. Training School

If you attended training school(s) and/or program(s), supply the following information.

Name of Business _____ Tel. _____

Mailing Address _____
City/Town Province/Territory Postal Code

Trainer _____
Surname First Name

Tel. _____ Email _____

What type/level of training was provided? (i.e. what did the curriculum include)

If you need more space, attach a separate piece of paper.

Send in any supporting documentation that is appropriate (e.g. curriculum document, certificate, etc.)

B. Private Trainer

If you used the services of a private dog trainer(s), supply the following information.

Trainer _____
Surname _____ First Name _____
Tel. _____ Email _____

What type/level of training was provided? _____

How many hours did you spend practicing the skills learned? (e.g. 20 hours/week for 8 weeks)

If you need more space, attach a separate piece of paper.

Send in any supporting documentation that is appropriate (e.g. curriculum document, certificate, etc.)

Owner Trained Dogs

If you were the sole trainer for your service dog, supply the following information.
In detail, describe the training that occurred and the number of hours of training you spent practicing the skills with the dog (e.g. 20 hours/week for 8 weeks)

If you need more space, attach a separate piece of paper.

Part 6 Certification and Consent to Release Information

1. I certify that I am a person with a disability and I require the use of a service dog.
2. I certify that the information I have provided in this application is, to the best of my knowledge, true and complete.
3. I understand that inaccurate, misleading, missing or false information may lead to denial or cancellation of my service dog team certificate.
4. I hereby give consent to school(s) or trainer(s) listed in this application to disclose any personal information the Registrar, Service Dog Act, deems necessary to receive my service dog team certification.
5. I hereby give consent to the release of my personal information in this application to a person or organization designated by the Registrar for the purpose of the service dog assessment.
6. I understand the identification card is the property of the Province of Nova Scotia and must be returned upon request, or upon retirement of my service dog.

Applicant or
Parent/Guardian _____
Name Date (yyyy/mm/dd) Signature

Thank you for completing the application.

For Office Use Only		
Approval Date (yyyy/mm/dd)	Authorization for Service Dog Assessment Approved by	Date Forwarded for Assessment
Notes		

For Office Use Only			
Date Assessment Results Received	Assessment Results <input type="checkbox"/> Completed <input type="checkbox"/> Not Completed	ID Card Issued #	Expiry Date
Notes			

This information will be used for the purpose of determining eligibility for a Service Dog Team Certificate as provided under the Service Dog Act. The personal information provided on this form is collected under the authority of the Service Dog Act and managed in accordance with the Freedom of Information and Protection of Privacy Act (FOIPOP).