

# (Accredited Schools) New or Renewal Application for Service Dog Team Certificate



Use this form if your dog was trained by Assistance Dogs International or International Guide Dog Federation, and you are applying for a **NEW** Service Dog Team Certification, or you are **RENEWING** your Service Dog Team Certification.

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:

- Written confirmation of successful completion of training program from an accredited training school
- 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)

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](mailto: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 new 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

### Part 4 Dog Information for Renewal *(complete if you are renewing your certification)*

Name of Service Dog \_\_\_\_\_

Do you continue to require the service dog's assistance for daily living?  Yes  No

### Part 5 Accredited School Information

Name of Accredited School:

- Assistance Dogs International  
 International Guide Dog Federation

\_\_\_\_\_

Contact \_\_\_\_\_  
Name Telephone Email

Yes, I have attached written confirmation from the accredited training school that my dog and I have successfully completed the training program.

### 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 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.***

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