KENNEWICK SCHOOL DISTRICT
CLASSROOM PET REQUEST FORM

Today’s Date: _______________ Site: ________________________________

Program/Grade Level: _______________ Teacher: ________________________________

Pet Requested: ________________________________
(type of animal)

Educational Objective:
Is there a specific project for which this animal is required? [ ]
Is there a written curriculum for this project? [ ]
Describe the educational benefits of having this animal (pet) in the classroom:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Plan of Care:
Describe the feeding and care requirements of this animal: __________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
What equipment and materials will need to be obtained to care for and house/contain the
animal? __________________________
________________________________________________________________________
________________________________________________________________________

Are licensing and/or inoculations (shots) required for this animal? __________________________
If yes, what are the requirements? __________________________
________________________________________________________________________

Who will be responsible for daily feeding, care and housekeeping? __________________________
Who will care for the animal on weekends? __________________________
What is the telephone number for the staff member who is responsible for this animal? ______
Who will care for the animal during school breaks and holidays? __________________________
2318-R-F1

**How long do you intend to keep the animal in the room?** __________________________

**What will become of the animal at the end of the project/school year?** _________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

**Safety and Health Considerations:**

**What human safety and health concerns are associated with this animal?** _________________

________________________________________________________________________________

________________________________________________________________________________

**What personal protective equipment is required to handle and care for the animal?** ________

________________________________________________________________________________

________________________________________________________________________________

**How are parents/guardians to be notified of intent to bring the pet into classroom?** ________

________________________________________________________________________________

**Are there students in the classroom with allergies, animal sensitivities, or special needs?** ____

**If yes, what precautions will be taken to accommodate them?** ____________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

_____________________________________________ ________________________________
Signature of Employee Date

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**Approval**

Principal: __________________________________________________________________________

Approved ☐ Not Approved ☐ Conditionally Approved ☐

**Before Animal Arrives Send Copy to:**

Custodian
School Nurse
District Office – Safety & Risk Management