



# Vet 2 Vet Service Dogs

## Service Dog Application Form

### INSTRUCTIONS FOR COMPLETION AND SENDING THE APPLICATION

Please download and print this document. Once completed and signed, you may return it by US Mail or by scanning and attaching to email indicated below. Please note that due to the variability of camera and printing quality, a *photograph* of the application is not acceptable.

As an all-volunteer organization, we will respond to all applications and inquiries as quickly as possible.

Thank you! We value your interest and hope to meet you soon!

Please mail your application to:

Vet 2 Vet Service Dogs  
P.O. Box 324  
Coopersburg, PA 18036  
Attn: Service Dog App

OR

Email to:

[j.spess@v2vsd.org](mailto:j.spess@v2vsd.org)



# Vet 2 Vet Service Dog Application Form

*"Placing a service dog with one Veteran will not change the world but for that one Veteran the world will change forever." -Mo Sullivan,  
Founder and Graduate Service Dog Mentor*

## Important Information About Your Application

We respect the time, talents, and health of everyone involved with Vet 2 Vet Service Dogs. All our volunteers, employees, and veterans are considered valuable assets! As such, your life experience is critically important to our evaluation, matching, and training process. Please be aware that, depending upon many variables, the process of training and matching a service dog and a Veteran may take 24 months or more. Your answers to the following questions are highly confidential and are neither exclusive nor inclusive of your journey toward service dog and mentor partnerships. Thank you for considering Vet 2 Vet Service Dogs!

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Phone Number: \_\_\_\_\_ Other Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

**1. Your availability when partnering with a dog must be considered. What is your current Employment Status?**

Full-time \_\_\_\_\_

Part-time \_\_\_\_\_

As needed \_\_\_\_\_

Not currently employed: \_\_\_\_\_

Retired: \_\_\_\_\_

**2. If employed, briefly explain where you work and what you do:**

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**3. Do you have a Veteran's Administration disability rating?**

Yes: \_\_\_\_\_

No: \_\_\_\_\_

In process: \_\_\_\_\_

**4. Have you previously owned a service dog?**

Yes: \_\_\_\_\_

No: \_\_\_\_\_

**5. If you previously owned a service dog, when and for how long did you own it?**

From: \_\_\_\_\_ To: \_\_\_\_\_

**6. Do you currently own a pet that might interact with a service dog?**

Yes: \_\_\_\_\_

No: \_\_\_\_\_

**7. Are there children in your home?**

Yes: \_\_\_\_\_

No: \_\_\_\_\_

If yes, how many and what ages are they?

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**8. Have you ever been convicted of a felony?**

Yes: \_\_\_\_\_

No: \_\_\_\_\_

If yes, above, please explain:

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**NOTE:**

**If accepted into our program you will be required to submit your DD214, a Statement of Need from your mental health care provider, and a family letter of support.**

**9. What is your current military status, service branch, and dates of service?**

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**10. During which conflicts did you serve?**

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**11. Did you sustain any injuries while serving?**

Yes: \_\_\_\_\_

No: \_\_\_\_\_

**12. Rank at Discharge and Type of Discharge**

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If other than an honorable discharge, please explain here:

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**13. Please provide three (3) personal references including Full Name, Company, Address, Phone, and relationship.**

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I understand that it may take 24 months or longer before I am contacted regarding my eligibility/ acceptance into the V2V service dog training/mentor program. \_\_\_\_\_ (initial)

I certify that the facts set forth in this Service Dog Application are true and complete to the best of my knowledge. I understand that if I am accepted into the program, any false statements, omissions, or misrepresentations may result in my dismissal. I authorize Vet 2 Vet Service Dogs to make an investigation of any of the facts set forth in this application and release Vet 2 Vet Service Dogs from any liability. Vet 2 Vet Service Dogs may contact any references listed on this application.

By entering my name below, I understand and agree that this form of signature, even if electronic or typed, has the same legal force and effect as my manual signature.

\_\_\_\_\_ Yes, I understand and agree.

\_\_\_\_\_ No

**Full name:**

\_\_\_\_\_

**Today's Date:** \_\_\_\_\_

**Please print, sign, and mail this application to:**

Vet 2 Vet Service Dogs  
P.O. Box 324  
Coopersburg, PA 18036

Optionally, print, sign, scan, and Email to: [j.spess@v2vsd.org](mailto:j.spess@v2vsd.org)