We are glad that you are thinking about applying for a Hearing Dog from Dogs for Better Lives. Before you begin the application process, it is important that you read this information and give it some very serious thought.

Our Dogs
- We rescue most of our dogs from animal shelters
- Hearing Dogs typically weigh 10 or more pounds and are between 1 and 3 years of age
- We evaluate dogs based on temperament and age; not looks, sex, breed mix, or size
- The dogs are young and active and need exercise

Please Carefully Consider the Following Points:

A Hearing Dog Requires:
- Typically Dogs for Better Lives requires a fenced yard attached to the home, a common area or dog park is not appropriate
- At least one full Training Year for dog and handler to become a well-formed team
- Total commitment to practice sound work daily
- Practicing obedience commands and house manners daily
- Taking the time to play with and reward your Hearing Dog for a job well done
- Providing exercise for your young, active Hearing Dog
- Taking sole responsibility for the care of the Hearing Dog so that he/she will bond with you
- Other family members to refrain from giving the Hearing Dog attention until the Hearing Dog has completely bonded with you
- You to spend time and money for vet, food, grooming, obedience classes and/or a private trainer

Based on the information you provide us about your health, lifestyle, activity level, home environment, and previous experience with dogs, we will select the dog best suited to you from the dogs that are available to us.

Minimum Physical Requirements to have a Hearing Dog
- Ability to walk a dog on leash (minimum 1 mile)
- Ability to handle a dog making physical contact (front paws or nose) multiple times per day
- Ability to promptly follow a dog to a sound multiple times per day
Other Pets in the Home
- Hearing Dogs are not placed in a home with another dog, except possibly one of our retired Hearing Dogs.
- If you have a cat(s), we can place a dog that works well with cats. If the cat does not do well with the Hearing Dog, the cat must be placed in another home.
- Other animals will be discussed during the application process.

Types of Hearing Dogs We Train
Dogs for Better Lives trains two types of dogs: Home Hearing Dogs and Certified Hearing Dogs. Both types of Hearing Dogs have the same sound work training.

- Home Hearing Dogs are for clients who need a trained dog to alert to sounds in their home environment but do not require a dog to accompany them into the work place or travel frequently.
- Certified Hearing Dogs are for clients that have sound work needs in their work environment in addition to their home environment and tend to travel more.
  
  - A Certified Hearing Dog will naturally provide greater environmental awareness by their reactions to the world around them.
  
  - A Certified Hearing Dog requires a minimum of 3 training trips into public every week.
    
    o Public includes but is not limited to department store, grocery store, and restaurants
    o Certified Hearing Dogs also require practicing obedience in environments where there are other dogs such places include pet stores and parks. Dogs for Better Lives, does not advocate the use of off leash dog parks.

The only difference between a Home Hearing Dog and a Certified Hearing Dog is the level of confidence the dog has in new environments, new situations, and meeting new people.

Do you need a Hearing Dog certified for public access?
- Do you travel alone frequently and need a dog to work sounds for you in a hotel?
- Do you need a dog to work sounds for you in your workplace?
- Do you require environmental sound awareness?

Typical Sounds We Train Our Dogs to Perform
- Phone, door knock/bell, smoke alarm, name call, oven timer, alarm clock
- Baby cry, we can train for this, but it can be challenging for parents to do the work necessary in order to maintain the dog’s consistency in working the sound

Sounds/Tasks Our Dogs do not Perform
- Sirens, honking horns, running water, boiling water, toilets running, etc.
- Dogs are not trained to pick up and retrieve dropped items

**Sound work**
- An alert is how the dog physically lets you know that a sound is happening.
- A dog will alert you by making physical contact.
- When the dog alerts, you must immediately stop what you are doing and follow the dog as it leads you to the sound. This means that if you are cooking, or watching a movie, you must stop and follow the dog to the sound. If the dog has worked well, take time to reward the dog. If the dog was confused and did not work well, you need to set the sound up again immediately to help the dog learn. You cannot wait until later; the dog will not learn if you wait.
- The dog must work sounds every time they occur, not just when it is convenient. To work the phone, no one else can answer the phone; others must wait for the dog to alert you and lead you to the phone. If the dog did not work well, you must hang up and have the person call you back to practice it again.
- The more “distractions” you have in your environment (children, pets, visitors), the more difficult it is for a dog to work. More distractions mean much more practice in order to achieve consistent results.
- Sound work needs to be practiced daily. Practice sessions need to be set up. You cannot just wait for sounds to occur naturally. Many sounds require the help of another person.

**What sounds are realistic for a Hearing Dog to work for you?**
- Having a Hearing Dog work all the sounds we train for may not be realistic in your situation.
- If your spouse or children always answer the phone, and/or you do not talk and/or hear on the phone, then having a Hearing Dog work the phone for you may not be necessary. If the dog works the phone, you must be the one to answer it every time it rings.
- You need to set and use the alarm clock every day if you want the dog to work that sound. If you want to use an alarm clock once a month, having the Hearing Dog work it for you is unrealistic.

**Additional Sounds**
- Once a Hearing Dog is settled in the new environment and has bonded with you, it is relatively easy to teach the dog to work additional sounds, if they are realistic sounds.
- Carbon monoxide detectors, cell phones, teakettle whistle, and fax machines are all good examples of realistic sounds.
Placement

- The placement process for a Certified Hearing Dog is 5 days in length. The placement process for a Home Hearing Dog is 3 days in length. Please be aware that you will need to make yourself available to work with the dog and the trainer during the entire placement.

- You will be required to take time off from work or school, and arrange for childcare outside of the home.

- You will be required to spend additional funds for treats and toys during placement.

- A veterinary trip at the client’s expense is planned during placement to introduce your Hearing Dog to its veterinarian and purchase necessary supplies (heartworm, flea and tick medications).

- After placement, you will be required to attend training classes, or hire a private obedience trainer if classes are unavailable. This will help form a stronger bond between you and your dog as well as teach the dog to listen and to obey you.

Hearing Dog Application Process

Along with the completed application, all applicants for Hearing Dogs must pay a $50 non-refundable application fee; send in a copy of their medically based audiogram, a physician’s assessment, and a character reference letter from a nonfamily member. The Placement Screening Committee then reviews this. This panel consists of Audiologists and professionals who work with people who are deaf or hard of hearing.

- After the application has been screened and approved to go on to the next step, an in-home interview of the applicant is scheduled. This in-home interview provides us with additional information on the applicant’s needs and lifestyle. All household members must be present at the interview.

- After the interview is completed and returned to Dogs for Better Lives, the entire application, packet will be carefully reviewed and a final decision made as to whether or not the applicant is accepted to receive a Hearing Dog. A letter will be mailed to the applicant regarding the decision.

- If accepted to receive a Hearing Dog, an Acceptance Questionnaire will be sent with the acceptance letter. A Refundable Good Faith Deposit of $500 is required at this time. Once we have received the completed Acceptance Questionnaire, Refundable Good Faith Deposit, and the signed Good Faith Agreement, the applicant will be placed on the waiting list to receive a Hearing Dog.

- Once a Hearing Dog is ready for placement, we select the applicant on our waiting list that we believe is the best match for that dog—the place where the dog’s skills and personality will enable it to be the most successful in helping the applicant.
Acknowledgement of Description and Requirements

By initialing and signing below, I acknowledge that I have read and understand the following:

____ I will be required to submit a $50 non-refundable application fee with my completed application. The fee is non-refundable regardless of Hearing Dog approval.

____ If I am accepted to receive a Hearing Dog, I will be required to pay the $500 Good Faith Deposit at the time I am notified. The Good Faith Deposit is fully refundable one year after the placement of my Hearing Dog.

____ Currently, the expected wait time to receive a Hearing Dog is 12 to 18 months.

____ I understand that the first year is a training year and will be challenging, and that I am responsible for keeping up the training with the help of the Dogs for Better Lives Training Staff.

Signature: ___________________________________________ Date: ______________

Please complete this form and mail it back to Dogs for Better Lives, along with the:

1) APPLICATION
2) $50 APPLICATION FEE
3) MEDICALLY-BASED AUDIOGRAM
4) PHYSICIANS ASSESSMENT
5) LETTER OF PERSONAL CHARACTER RECOMMENDATION

Name:________________________________________________________________________

Mailing Address:________________________________________________________________

Phone Number: ______________________________________________________________

Would you like to receive our Canine Listener Magazine and updates via email? Yes No

Would you also like to receive a hardcopy of our Canine Listener Magazine? Yes No

E-mail address: __________________________________________________________________

If you have questions or concerns about the application process, please feel free to contact us at (541) 826-9220 Voice/TDD or e-mail us at info@dogsforbetterlives.org. Our office hours are 8:00 am to 4:30 pm Pacific Time, Monday through Friday, and we will be glad to assist you.
Hearing Dog Application

Name: ___________________________ Date: ___________________________

Street Address: ________________________ Mailing Address (if different):
_________________________________
_________________________________
_________________________________

Home Phone: __________________________ Cell Phone: __________________________

Work Phone: __________________________

E-mail Address: __________________________

Contact Name: __________________________ Phone: __________________________
(emergency contact – someone who does not live with you)

Preferred form of communication

Hear on Phone  Email  Text  Use Voice Carry Over (VCO)  Captel

How do you communicate in person?

Lip reading? Always  Sometimes  Never
Use sign language? Always  Sometimes  Never
Use voice? Always  Sometimes  Never

I learn best by: (Rate 1 to 3 in order of preference)

Reading  ___________  Doing  ___________  Watching  ___________

Your Age (optional): ____________
MUST be 18 or older to apply
Your Personal History

Please help us get to know you by sharing some of your personal history. Why do you want a Hearing Dog? What do you want us to understand about you and your life? How long have you been deaf or hard of hearing? What was the cause?

________________________________________________________________________
________________________________________________________________________
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Sound Awareness

Hearing Dogs are trained to alert you to sounds in your home and workplace; they are not trained to work sounds for you in public.
I need a Hearing Dog to help me with the following sounds:

Fire/Smoke Alarm    Yes  No    Alarm Clock    Yes  No
Telephone          Yes  No    Name Call      Yes  No
Oven Timer         Yes  No    Baby Cry       Yes  No
Doorbell/Door Knock Yes  No

Please list other sounds that you might want the dog to work for you.______________________________________
I understand that there are some sounds which the dog may not be able to learn because they are too hard to set up for practice, or because they are not repetitive, or are too hard to train a dog to do. This includes alerting to me water boiling on the stove, running water, or a child leaving the house.

If no, please explain ____________________________________________________________

What assistive devices do you have? ____________________________________________

Do you wear hearing aids? Yes No

Do you have a cochlear implant? Yes No

Are you scheduled to receive a cochlear implant? Yes No

If yes please give date for surgery______________________________________________

What sounds can you hear in your home or office with your hearing aids or cochlear implant in? ____________________________________________________________

Check One:

_____ I do not need to take a dog with me into public places.

_____ I do need to take a dog into public places. If so, why? ______________________

I travel alone frequently and need a dog to work sounds in hotels. Yes No

Check One:

_____ I work, but do not need to take a dog with me.

_____ I work and do need a dog to work sounds for me at work. If so, what sounds?

Home Environment

I live in a (circle one):

House Duplex Apartment Retirement Facility Mobile Home

Other: ____________________________________________

If you rent, is your property owner aware that you are applying for an assistance dog? Yes No
Describe the home environment. (Size, number of rooms, upstairs, ground floor, noise levels, etc.)

Typically, we require a fenced yard attached to the home. A common use area or dog park will not qualify.

Is your yard fenced?  
Yes    No

If yes, what size is it?  
Length  Width  Height

If no, when you fence the yard, how large will your fence be?  
Length  Width  Height

Please circle all of the following that describes your living situation:

Yes     No  Enclosed outside play area

Yes     No  Neighborhood dogs running loose

Yes     No  Park or nearby walking trails

Yes     No  Busy streets nearby

Yes     No  Neighbors in close proximity

Please list other people living in your home.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age (if minor child)</th>
<th>Relationship to you (Optional)</th>
<th>Does this person have a hearing loss? If so, how severe is it?</th>
<th>Any other physical or emotional challenges (optional)</th>
<th>Work/ School Hours</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Please list people who visit your home frequently.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age (if minor child)</th>
<th>Relationship to you (Optional)</th>
<th>Visit how often?</th>
</tr>
</thead>
<tbody>
<tr>
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</table>
Work Environment

If you want to be considered for a Hearing Dog to go to work with you, please complete the following section. The following is a description of the work environment where the dog will be with me:

Have you discussed bringing Certified Hearing Dog to work with your employer and co-workers?   Yes    No
What was their response?

I do not intend to take a Hearing Dog with me when I go to work or school. When at work or school, this is how my dog will be cared for:

Physical Ability to Handle a Dog

To have a dog work for you, you must be physically able to promptly follow a dog to a sound many times a day, and you must be able to physically handle the dog.

<table>
<thead>
<tr>
<th>Handling the dog includes:</th>
<th>10-25 pound dog</th>
<th>25-60 pound dog</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am able to maintain control and take dog on a leash.</td>
<td>Yes   No</td>
<td>Yes   No</td>
</tr>
<tr>
<td>I am able to lift a dog into a car.</td>
<td>Yes   No</td>
<td>Yes   No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Handling the dog includes:</th>
<th>10-25 pound dog</th>
<th>25-60 pound dog</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am able to have a dog jump up on me, paw me, or tap me with his nose many times a day to alert me to</td>
<td>Yes   No</td>
<td>Yes   No</td>
</tr>
<tr>
<td>I am able to play interactively with a dog (throw a ball, kick a ball, and play with toys).</td>
<td>Yes   No</td>
<td>Yes   No</td>
</tr>
</tbody>
</table>

Please circle the number that best describes your level of activity.

HIGH ACTIVITY  -1-  -2-  -3-  -4-  -5-  -6-  LOW ACTIVITY

Other Requirements for Handling a Dog

If the dog alerts me to a sound, I am able to visually follow the dog back to the sound.

Yes   No
For a Hearing Dog to work well for you, you must be the person to feed, exercise, and care for the dog. You need to set up daily practice with the dog for each sound the dog works for you, at a time when you are able to work patiently with your dog.

Generally, I am able to deal with frustration. If no, please explain: Yes No

I am able to care for the dog myself. I understand that it is important for me to be the one to feed, exercise, potty, and practice sounds and obedience commands with the dog so the dog learns to listen to and obey me.

I am willing and able to patiently teach a trained Hearing Dog to listen to and respond to me.

Please describe your daily routine (attached additional paper if necessary).

__________________________________________________

__________________________________________________


Training Support System

For a Hearing Dog to work well for you, everyone living in your home must like dogs and be willing to have a Hearing Dog work for you. They must be willing to support you getting a dog and let the dog work the sounds for you consistently.

I have talked with everyone I live with about getting a Hearing Dog. They support my decision to apply for a Hearing Dog, and have no fear of dogs or dog related allergies. If no, please explain: Yes No

Type of Dog

Dogs for Better Lives, rescues mixed breed dogs from shelters based on temperament, not appearance. Our dogs come in a wide variety of sizes, shapes, looks, colors, and coat types. They are all wonderful dogs that will provide sound awareness and special companionship for our clients. Once a Hearing Dog is ready for placement, we select the applicant who is the best match for the dog, the place where the dog’s skills and personality will enable it to be the most successful in helping the client. We do not place dogs based on an applicant’s request for a specific look.

We do not place Hearing Dogs in homes with other dogs, except our retired Hearing Dogs.

If you have a cat(s), we can place a dog with you that does well with cats. There may be a significant period of adjustment. If your cat does not do well and/or adapt, you must find another home for your cat.
Other animals, such as rabbits, ferrets, iguanas, birds, etc., are more challenging for a Hearing Dog to work around. If you have animals other than cats and are not willing to re-home them, it may be very difficult to find a dog to meet your needs. This will be reviewed by our Screening Committee and will be determined at that time.

Have you ever had a dog before?  □Yes  □No  If yes, what kind?  ________________________________

Describe your past experiences with dogs:  ________________________________________________________________

If you have a dog now, you must be willing to rehome your dog if you are approved for a Hearing Dog.

Do you have any other pets?  Yes  No  If yes, what kind?  ________________________________

Are you willing to re-home animals that are too distracting for a Hearing Dog to work around or do not adapt well to a Hearing Dog?  Yes  No

Anticipating problems: People who think about how they would deal with problems before they happen are better equipped to deal with them. Please list the types of things that could get in your way of working with and caring for your dog daily (for example: illness, taking care of children, work schedule, etc.).

Please give details.  ________________________________________________________________

To keep a dog working sounds for you, you must set up daily practice sessions with the dog for each sound. For many sounds you will need someone to assist you. This means you will need to set up daily practice for sound work and obedience with your dog.

Name two people who can help practice sound work: ____________________________________________

When do you have time in your daily schedule to practice sounds with a dog? Please list the days and times.

__________________________________________________________________________________________

__________________________________________________________________________________________

Understanding what a Hearing Dog does

I understand that Hearing Dogs are trained to alert me to household sounds, such as the doorbell, telephone, or my name being called. If other persons in my home answer the door, telephone, etc., rather than allowing my Hearing Dog to alert me and take me to the sound, the dog will stop alerting me.

If no, please explain:  ________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________
I understand that Hearing Dogs are chosen for their people-friendly manner; they are not trained as guard dogs.

Yes    No

If no, please explain: ________________________________________________________

If I qualify for a Hearing Dog certified for public access to accompany me into public places, I understand that a Hearing Dog is not trained to alert me to sounds in public places such as restaurants, doctor’s offices, or stores.

Yes    No

If no, please explain: ________________________________________________________

I understand a Hearing Dog is not trained to pull me out of the way of traffic or to alert me to sirens.

Yes    No

If no, please explain: ________________________________________________________

I understand that if I am paying attention, the Hearing Dog’s awareness and reaction to the environment will help me be more aware of what is happening around me.

Yes    No

If no, please explain: ________________________________________________________

After carefully reviewing the information you have provided, the Screening Committee will make a determination as to which type of Hearing Dog would be most appropriate for your needs and lifestyle. A Certified Hearing Dog will be placed out of necessity. Please carefully consider your needs.

Training Trips: Three times a week.

• Going to public places specifically to practice obedience with your dog. Examples: Department stores, grocery stores, mall.
• Going to places, you are likely to encounter other dogs, such as parks or pet stores so you can practice obedience with dog distractions. Hearing Dogs must ignore other dogs when in public, this is difficult for them so ongoing practice is essential to keep up their training.

Financial

Our trained Hearing Dogs are provided to you free of charge, but you are solely responsible for all ongoing costs of keeping your Hearing Dog fed, healthy, and working for you.

Ongoing costs for a Hearing Dog include:

• High quality dog food
• Toys and treats for training rewards
• Regular veterinary check-ups
• Emergency veterinary treatment
• Grooming
We estimate the yearly cost of having a Hearing Dog to be more than $750. Emergency veterinary trips can significantly increase this amount.

We do not recommend you apply for a Hearing Dog if it will be a financial hardship.

I understand I am fully responsible for the care of the dog after it comes to live with me. Yes No
I expect and am able to pay for yearly veterinary expenses and unexpected veterinary expenses. Yes No
I understand that to keep a Hearing Dog working I will need to buy new toys and treats on an ongoing basis. Yes No
I understand I need to feed my Hearing Dog a high quality dog food and that this will cost significantly more than “grocery store” dog food that is less nutritious. Yes No
I understand that Dogs for Better Lives, does NOT require applicants for our dogs to do any fundraising or public relations activities either before or after receiving their dog. Any participation in these kinds of activities will be the choice of the clients and will not affect whether or not they receive a dog from Dogs for Better Lives. Yes No

In the event of extreme emergency veterinary expenses:
I will be able to take care of the bill myself. Yes No
I will be able to get help from friends or relatives. Yes No
I would need special financial assistance. Yes No

Are there any questions or comments about the costs for caring for a Hearing Dog?

Additional Information

Have you ever received or applied for a Hearing Dog before? Yes No
If yes, when and from whom? ________________________________

Did you receive a dog? Yes No
If yes, when? ________________________________

If you have had a Hearing Dog from another training center, why are you applying for a Hearing Dog from Dogs for Better Lives, instead of from the other organization?

How did you first hear about Dogs for Better Lives?
Have you or anyone living with you ever been convicted of a felony?   Yes   No
If yes, state type of conviction:  

Dogs for Better Lives, does not discriminate on the basis of race, religion, national origin, color, sex, sexual orientation, marital status, age, veteran status, disability or any other legally protected status. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on dog placement needs both for you and the dog related factors.

Dogs for Better Lives, controls access to applicant/client files, hold all applicant/client information strictly confidential, and agree that such information shall be used only for the designated purpose, and shall not be used for any other purpose or disclosed to any third party.

I hereby declare all information in this packet to be truthful to the best of my knowledge.

Signature of Applicant:   ___________________________   Date:   ____________

If under 18 years of age, Legal Guardian’s Signature:   ___________________________

If Conservator or Guardian has been assigned, please sign here:   ___________________________

If the person filling out this application is other than the applicant, please give name and explain why:

________________________________________________________________________

---

Dogs for Better Lives is a non-profit corporation organized under the laws of the State of Oregon.

Instructions

There is a Physician Assessment and two HIPAA releases provided which you will need to complete, have witnessed, and provide to your Physician and to your Audiologist in order for them to release the completed assessment and Audiogram back to Dogs for Better Lives.

Please include at least one letter of personal character recommendation to be submitted by a non-family member with the application.

Please return this entire application along with your $50 application fee to:

Client Services
Dogs for Better Lives
10175 Wheeler Rd.
Central Point, OR 97502
Dear Physician:

_____________________________ has applied for a Hearing Dog (Assistance Dog) from Dogs for Better Lives. There are certain physical, mental, and emotional requirements that will enable a person to successfully handle and benefit from an assistance dog.

The Nature of the Dog
We strive to select dogs for clients that best meet their health, lifestyle, activity level and home environment. However, all of our dogs are working dogs and thus young and energetic. They need physical exercise, mental stimulation, and interactive play time on a daily basis. Hearing Dogs weigh 10 pounds and up, and are between 1 and 3 years of age.

Client Requirements (especially during the first six months after the dog is placed with the client)

• Going into public places specifically to practice obedience with the dog. (This only applies to Certified Hearing Dogs).
• Going to places where the client is likely to encounter other dogs, such as parks or pet stores, to practice obedience with the dogs. (Hearing Dogs must ignore other dogs when in public. This is difficult for them, so ongoing practice is essential in order to keep up the dog’s training).
• Keeping the dog well-groomed and well-behaved.
• The dog must be the client’s priority – people will look and watch how the client is handling the dog – which can be stressful.
• The client must be aware of the dog and its behavior at all times. When the dog ignores the client’s commands, the client must work through the problem confidently and patiently.

Requirements of Sound Work

• A dog alerts the client to a sound by jumping on them, pawing them, or tapping them with its nose.
• When the dog alerts the client, the client must immediately stop what they are doing and follow the dog as it leads them back to the sound.
• Sound-work needs to be practiced daily and practice sessions need to be set up.

Other Requirements

• The client must be physically able to get up and down and move quickly enough to follow a dog to sounds.
• The client must be able to withstand the physical alerts the dog makes.
The person must be able to feed, exercise, and care for the dog.
The client must be able to patiently work through problems.

Attached is a Physician Assessment listing physical, emotional, and mental tasks that are required for a successful human-canine relationship with a Hearing Dog. The client also has presented you with an Information Release and Authorization that allows you to release this assessment to us. Please mail completed assessment and release in a confidential envelope to:

Dogs for Better Lives
Attention: Client Services
10175 Wheeler Road
Central Point, OR 97502

Please note that we have not asked any specific questions about the client’s hearing. A separate assessment is being requested of an audiologist.
Patient/Hearing Dog Applicant Name: _____________________________________________________

Date of Assessment: _____________________________

<table>
<thead>
<tr>
<th>Physical Requirements for Working with a Hearing Assistance Dog</th>
<th>Assessment and/or Restrictions on Ability to Perform</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ability and Size of Dog</strong></td>
<td></td>
</tr>
<tr>
<td>Maintain control of a 10-25 pound dog on a leash</td>
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<tr>
<td>Maintain control of a 25-60 pound dog on a leash</td>
<td></td>
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<tr>
<td>Lift a small dog (under 20 pounds) into a car</td>
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<tr>
<td>Can handle a dog 10-25 pounds jumping up and pawing them many times during the day to alert them to sounds</td>
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<tr>
<td>Can handle a 25-60 pound dog pawing them or nosing them many times a day to alert them to sounds</td>
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<tr>
<td><strong>Mobility and Balance</strong></td>
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<tr>
<td>Able to walk a dog on a leash</td>
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<tr>
<td>Ability to climb stairs</td>
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<tr>
<td>Ability to play interactively with a dog (throw a ball, kick a ball, play with toys)</td>
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<tr>
<td>---------------------------------------------------------------------------------</td>
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<tr>
<td>Any balance issues which would make handling or walking a dog on a leash difficult</td>
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</tbody>
</table>

### Emotional and Mental Challenges

Are there any mental or emotional issues that would make it difficult for this person to work calmly and consistently with a dog? If yes, please describe.

### Other Health Issues

Are there any other health conditions that would make it difficult for this person to have a dog in their home 24 hours a day? If yes, please describe.

Additional Comments:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Thank you for completing this assessment.

Signature of Physician: ___________________________  Address: ___________________________

Print Name: ___________________________
Note to Applicant: The following information is a necessary part of the application process. This will enable Dogs for Better Lives, to send your audiogram to our screening Audiologists for evaluation. This will also allow your Physician to send us your Physician’s Assessment to help evaluate eligibility.

I, _______________________________, residing at ____________________________________________
__________________________________________, with date of birth of ________________________,

OR

As parent or legal guardian of ___________________________________________, with date of birth of ________________________, I, _____________________________________________, residing at
____________________________________________________________________________________
with date of birth of ______________________,
authorize any physician, health-care professional, hospital, or other covered health-care provider, that has provided treatment or services to me, to give, disclose and release to the agent(s) as hereinafter described, without restriction, all of my individually identifiable health information and medical records, regarding any past, or present, including all information relating to the physical history, condition, advice or treatment.

The person(s) designated as my agent(s) for purposes of this agreement is Dogs for Better Lives or its employees.

The authority given my agent(s) shall supersede any prior agreement that I may have made with my health-care providers to restrict access to, or disclosure of my individually identifiable health information. The authority given my agent has no expiration date and shall expire only in the event that I revoke the authority in writing and deliver it to my health-care provider.
I intend for my agent to be treated, as I would be with respect to my rights regarding the use and disclosure of my individually identifiable health information or other medical records. This release authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 (aka HIPAA), 42 USC 1320d and 45 CFR 160-164, and all other applicable state and federal law.

Dated: ________________________

________________________________
(Signature)

________________________________
(Printed Name)

WITNESSES:

________________________________  Address: ______________________
(Signature)

________________________________
(Printed Name)

________________________________  Address: ______________________
(Signature)

________________________________
(Printed Name)

Physician or Audiologist: Please mail this form and completed physician assessment or audiogram provided in a confidential envelope to the address below. Thank you.

Dogs for Better Lives  
Attention: Client Services  
10175 Wheeler Road  
Central Point, OR 97502