

Thanks for your interest in our Assistance Dog program. Enclosed is our application packet and supporting information to help you and your family explore the possibility of obtaining an Assistance Dog.

To begin the application process with EENP, please provide us with the following:

- □ Client Form (enclosed, completed by you)
- Physician Information Form (enclosed, completed by your physician or your child's physician and sent directly back to EENP)
- D Personal Letter of Reference (from a friend or someone other than a family member)
- □ Professional Letter of Reference (from an employer, teacher, therapist, social worker, or any other professional with whom you have contact)
- □ Blood glucose data for the past 3 months (Diabetic Assistance Dog applicants only)
- □ Outside Service Area Policy, signed
- □ \$25 non-refundable application fee

Once <u>all parts</u> of your application have been submitted, we will review it and follow up with any questions.

Please contact us if you have any questions about our programs or the application process. We look forward to talking with you soon!