

# Provider Checklist



Organization/Trainer Name:

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Address:

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Phone#:

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Contact Person:

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Question

1.) How much will Assistance Dog cost? \_\_\_\_\_

2.) Is there an application fee or other types of fees? \_\_\_\_\_

3.) What breeds are used? \_\_\_\_\_

4.) Where does the organization get its dogs? \_\_\_\_\_

5.) What is the minimum age of a recipient? \_\_\_\_\_

6.) Does training occur at home or in a facility? \_\_\_\_\_

7.) How long is the dog in training before being placed with the recipient?

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8.) How long is training for the recipient and the dog as a team? \_\_\_\_\_

9.) What geographical area does the provider serve? \_\_\_\_\_

\_\_\_\_\_

10.) Will they consider training an individual's own dog as assistance dog?

\_\_\_\_\_

11.) What is the waiting period for a dog? \_\_\_\_\_

12.) Does the program award ownership of the dog to the recipient upon certification? \_\_\_\_\_

13.) What are the trainer's qualifications? \_\_\_\_\_

14.) Is the facility accessible to your physical needs? \_\_\_\_\_

\_\_\_\_\_

15.) Does the organization provide lodging for recipients during training?

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\_\_\_\_\_