Appendix 2

**One-off Dog Visit to an Otago Polytechnic Campus Approval Form** and

**Request and Risk Management Form**

Complete this form and forward it to Otago Polytechnic Animals@OP Committee, email [Animals@op.op.ac.nz](mailto:Animals@op.op.ac.nz) for approval for **one-off dog visit** at any Otago Polytechnic campus, at least one (1) month before the dog visit e.g. puppy cuddling, careers day, Tertiary Open days.

Link to Tūhono [Otago Polytechnic Animals@OP](https://tuhono.op.ac.nz/hub/staff/communities/animalsop/)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **OP kaimahi contact for the visit.** |  | | | | |
| **Kaimahi email address** |  | | | | |
| **External Group or OP School/Department requesting the visit** |  | | | | |
| **Responsible person for dog event during the visit?** |  | | | | |
| **Email** |  | | | | |
| **Contact phone** |  | | | | |
| **The rationale/purpose for the dog visit.** |  | | | | |
| **Date of the visit.** |  | | | | |
| **Location to be used for the visit.** |  | | | | |
| **Has permission from the manager/formal leader of the location for the dog visit been sought?**      **Has the location for the visit been booked?** | Yes / No  Name of Manager/Formal Leader  Date permission sought:        Yes/ No | | | | |
| **Time of Arrival** |  | **Time of Departure.** | |  | |
| **Breed of dogs/pups** |  | | | | |
| **Number of dogs** |  | | | | |
| **Age range of dogs** |  | | | | |
| **How is the dogs’ animal welfare being considered and what is the management for each of the Animal Welfare Act** [**five animal welfare domains**](https://www.spcacertified.nz/learn-more/article/five-freedoms-vs-five-domains) **listed.** | Nutrition |  | | | |
| Environment |  | | | |
| Health |  | | | |
| Behavioural Interactions |  | | | |
| Mental State/Experiences |  | | | |
| **Dog Risk Mitigation** | | | | | |
| **Risk to animal/s** | **Mitigation approaches** | | | **Level of risk High/Medium/Low** | |
| **How have the dogs been deemed suitable for this visit and activity/ies** |  | | |  | |
| **Preventing injury to other dogs** |  | | |  | |
| **Preventing injury to dog/s by humans** |  | | |  | |
| **Dog toilet management** |  | | |  | |
| **Identifying and preventing stress responses in dog/s** |  | | |  | |
| **Human Risk Mitigation** | | | | | |
| **Risk to humans** | **Mitigation approaches** | | | **Level of risk High/Medium/Low** | |
| **Safety: such as injury from dog bites, scratches** |  | | |  | |
| **How has human safety been considered** |  | | |  | |
| **Hygiene risks** |  | | |  | |
| **Allergic reactions** |  | | |  | |
| **Cultural or religious issues** |  | | |  | |
| **Fear of dogs** |  | | |  | |
| **Is there a food preparation area in the proximity?**  **Consultation with manager and mitigations identified.** |  | | |  | |
| **Notification of dog visit on campus and at the location.** |  | | |  | |
| **Risk Mitigation and Responsibility                                          Level of Risk** | | | | | |
| **Who will be responsible for the dog visit?** | Name | | |  | |
| Organisation | | |
| Email | | |
| Phone | | |
|  |  |  |  |  |  |

I declare I have read, understood and agree to abide by the relevant sections in the Otago Polytechnic Dogs Policy.

**Signed by the applicant requesting a one-off dog visit to Otago Polytechnic.**

**Date:**

**POST SUBMISSION OF REQUEST FORM for REVIEWING, RECORDING AND PROCESS**

|  |  |
| --- | --- |
| **Date request form received by Animals@OP** |  |
| **Name of Animals@OP kaimahi reviewing the request** |  |
| **Permission from the responsible manager at the location for the dog visit has obtained.** |  |
| **Feedback or specific requirements which must be met before this event is approved by Animals@OP on request** *(if applicable)*. |  |
| **Response from applicant to specific requirements (if applicable)** |  |
| **Animals@OP Committee approval date** |  |

***NOTE:  ALL RECORDS OF REQUESTS TO BE HELD BY ANIMALS@OP.***