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 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.***