



NJ Dogs of Honor

APPLICATION

Full Legal Name: _____

Home/Alternate Phone: _____ E-Mail: _____

Street Address: _____

City, State, Zip: _____

Date of Birth: _____ Marital Status: _____ Sex: _____

Children's Ages and Sex: _____

Military Branch: _____ Dates of Service (mm/dd/yy) _____ to _____

Rank: _____ Type of Discharge: _____

Service Connected Rating: _____ Service Connected Disabilities: _____

Employer Name, Address & Phone: _____

Occupation: _____

Annual Household Income: _____

Are you physically, mentally, emotionally and financially able to care for a Service Dog if provided one:

YES NO UNSURE

TRANSPORTATION:

Do you have access to transportation on a daily basis: Y N

If No, how do you get around? _____

Have you ever applied for a service dog from another organization?	Y	N
Have you ever been denied a service dog by an organization?	Y	N
Have you received services for veterans from other organizations?	Y	N

SYMPTOMOLOGY EXPERIENCES:

For each item select a number from the scale of 1 (does not limit daily function) to 10 (fully limits daily function):

Distractibility	1	2	3	4	5	6	7	8	9	10
Anxiety	1	2	3	4	5	6	7	8	9	10
Intrusive Thoughts	1	2	3	4	5	6	7	8	9	10
Dissociation	1	2	3	4	5	6	7	8	9	10
Flashbacks	1	2	3	4	5	6	7	8	9	10
Hallucinations	1	2	3	4	5	6	7	8	9	10
Feeling Isolated	1	2	3	4	5	6	7	8	9	10
Hypervigilance	1	2	3	4	5	6	7	8	9	10
Fear	1	2	3	4	5	6	7	8	9	10
Startle Response	1	2	3	4	5	6	7	8	9	10
Avoidance	1	2	3	4	5	6	7	8	9	10
Nightmares	1	2	3	4	5	6	7	8	9	10
Feeling Threatened	1	2	3	4	5	6	7	8	9	10
Aggression	1	2	3	4	5	6	7	8	9	10

In your own words, please explain why you need a service dog? How will owning a service dog improve your life?

In your own words, please explain what tasks you want your service dog to be able to do for you?

By signing below, you are agreeing to a signed contractual agreement that will be required prior to any issuance of a service dog through the NJ Honor Dogs. You attest that all the information in this application is true and correct to the best of your knowledge and belief. You understand that failure to provide complete information, falsification or misrepresentation of information may prevent you from receiving a service dog. Acceptance into this pilot program is at the discretion of the NJ Honor Dogs and completion of this application does not insure that you will receive a service dog.

Signature: _____ Date: _____

Printed Name: _____

PLEASE RETURN COMPLETED AND SIGNED APPLICATIONS TO:

**NJ Dogs of Honor
c/o Ted's Pet Country Club
2636 S. Second Street
Millville, NJ 08332**