



Government of South Australia
Dog and Cat Management Board

Accreditation of Assistance Dog Application

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Return this completed application form, including all requested attachments to:

Dog and Cat Management Board
GPO Box 1047
Adelaide SA 5001

Or

Email to dcmb@sa.gov.au

The Dog and Cat Management Board (the Board) will collect and store the information you voluntarily provide to enable processing of this application. The information will be provided to relevant staff and Board members where necessary. Any personal information provided by you may be stored in a database. The information will only be used for the purpose it was collected and in line with the South Australian Government's Information Privacy Principles. Depending on the nature of the application, this purpose may require the Board to share the information with other government or regulatory bodies, such as the relevant local council(s).



Part A: Application Form (to be completed by the Handler)

Handler Details			
Given Name		Surname	
Date of Birth		Phone Number	
Email Address			
Residential Address			
Address Line 1			
Address Line 2			
Suburb		Postcode	
Postal Address (If same as residential address, please leave blank)			
Address Line 1			
Address Line 2			
Suburb		Postcode	
Dog Details			
Dog Name			
Microchip Number		Registration Number	
Dog Breed			
Age of Dog		Date Training Commenced	
Suitability of the Dog			
Is the dog subject to a Control Order under section 50 of the <i>Dog and Cat Management Act 1995</i>? If 'Yes' please provide details:			
Required Documents forming a part of, and to be attached to this application			
1. Evidence of the Handler's identity ie copy of passport, driver's licence			
2. A passport style photograph of the Handler (head and shoulders photo).			



Part B: Medical Report

(to be completed by a Registered Medical Practitioner)

Medical Practitioner Details			
Given Name		Surname	
AHPRA Registration Number			
Phone Number		Email	

Medical Practice			
Practice Name			
Address Line 1			
Address Line 2			
Suburb		Postcode	

Medical Practitioner Declaration			
Name of Applicant		Date of Birth	
I am the medical practitioner of the individual named above and verify that in my opinion, the applicant has a disability and needs an assistance dog, as defined under the <i>Dog and Cat Management Act 1995</i> .			
Details	—		
Additional comments:			
I consent to being contacted in relation to this application.			
Signature of Registered Medical Practitioner			
Registered Medical Practitioner Name			
Declaration Dated			



Part C: Veterinary Report

(to be completed by a Registered Veterinary Surgeon)

Veterinarian Details			
Given Name		Surname	
Veterinarian Registration Number			
Phone Number		Email	

Veterinary Practice			
Practice Name			
Address Line 1			
Address Line 2			
Suburb		Postcode	

Veterinarian Declaration	
Name of Dog	
I have examined the above-named dog and verify that in my opinion, the dog is physically fit and able to undertake training and tasks as an accredited assistance dog, as defined under the <i>Dog and Cat Management Act 1995</i> .	
Microchip Number	
Desexed – enter date if known	
The dog is appropriately vaccinated, healthy and free from infectious diseases.	
To the best of my knowledge, the dog is not a prescribed breed as defined under the <i>Dog and Cat Management Act 1995</i> .	
Additional comments:	
I consent to being contacted in relation to this application.	
Signature of Registered Veterinarian	
Registered Veterinarian Name	
Declaration Dated	



Part D: Training Report (to be completed by Trainer)

Trainer/Training Organisation Details			
Given Name		Surname	
Training Organisation Name			
Australian Business Number (ABN)		Phone Number	
Email Address			
Address Line 1			
Address Line 2			
Suburb		Postcode	
Trainer qualifications and experience in dog training			
Dog Handler's Name		Dog's Name	
Please provide details of the training undertaken with the Handler and dog			
Please provide dates/duration that the training occurred			
Declaration by Trainer			
I verify that –			
1. The dog has been trained and is able to perform tasks that alleviate the effects of the Handler's disability. 2. The dog is reliable and has standards of behaviour and hygiene that are appropriate for an animal in a public place. 3. The dog and its Handler are trained to a level where they can pass all elements of the Public Access Test. 4. Both the trainer and Handler use force-free dog training and positive reinforcement methods. 5. I am not the person (Handler) seeking accreditation for the dog. 6. I give permission to be contacted in relation to this application.			
Signature of Trainer			
Trainer's Name			
Declaration Dated			



Part E: Public Access Test

(to be completed by DCMB Approved Assessor)

Purpose of the Public Access Test (PAT)

The purpose of the Public Access Test (PAT) is to **assess if a dog is safe and effective in a public place or public passenger vehicle and able to be effectively controlled by the Handler of the dog.**

The PAT indicates the minimum standard that a dog must achieve to be considered safe and effective in accessing public places and public passenger vehicles on a daily basis.

The PAT can only be conducted by an assessor approved by the Dog and Cat Management Board. A PAT conducted by a person other than a Board approved assessor is an invalid test.

Every element of the PAT must be passed to demonstrate that the dog and Handler perform at the required standard.

Grounds for immediate failure of the PAT

The following are **grounds for immediate failure of the PAT** –

- A dog that displays any inappropriate aggressive behaviour (growling, biting, raising hackles, showing teeth etc).
- Any dog that urinates or defecates in a building or shows uncontrollable behaviour.
- Any dog that shows a display of guarding of people, territory, possessions or food.
- Any dog or Handler who, due to their actions or behaviour is likely to bring disrepute ie a lack of respect or loss of good reputation to the dog, approved assessor or the Board.
- Any Handler who ill-treats the dog or is not willing to abide by all relevant laws.
- A fail mark in any element of the PAT.

Scoring of the PAT

- A pass mark in all elements indicates that the dog displays appropriate behaviour.
- A fail mark in any element indicates that the dog displays inappropriate behaviour.

**Public Access Test (PAT) to be Completed by Approved Assessor****1. Handler and Dog Details**

Date of PAT			
Approved Assessor Name			
Handler Name			
Dog Name			
Microchip Number		Registration Disc Number	

Notes:**2. Well-Managed**

2.1. The dog is settled, has a relaxed demeanor, is always under control and is unobtrusive [not pulling, or being in a state of higher arousal causing difficulty to Handler].	Pass ☐	Fail ☐
2.2. The dog is specifically trained to bark, to stop on command, and/or respond to voice/visual/signal/lead correction commands.	Pass ☐	Fail ☐
2.3. The team/unit is not a hazard/nuisance to the public.	Pass ☐	Fail ☐
2.4. The dog is well managed by the Handler - eg the dog responds to Handler's demands.	Pass ☐	Fail ☐
2.5. The dog Handler praises/rewards dog.	Pass ☐	Fail ☐
2.6. The dog recovers if startled and does not respond aggressively, or show fear, or continue to be affected after the incident has taken place.	Pass ☐	Fail ☐
2.7. The dog is on a lead/harness at all times.	Pass ☐	Fail ☐

Notes:

3. Public Places/Public Passenger Vehicles					
The dog will remain responsive to handler. Handler to be in control at all times. No excessive sniffing, drooling or grabbing of food, or excitability to be displayed by the dog.					
3.1. The dog sits under the handler's chair/table or is out of the way (not a trip hazard) for a minimum of 5 minutes.				Pass ☐	Fail ☐
3.2. The dog shows control of food distraction, eg heeling, controlled down. ie dog stays in a controlled manner.				Pass ☐	Fail ☐
3.3. The dog does not use public furniture or public seating.				Pass ☐	Fail ☐
3.4. Choose at least three (3) options from the list below to continue with the following assessment questions.					
PLEASE NOTE: At least one (1) public place and one (1) public passenger vehicle must be chosen. If no taxi is available, then the trainer's car* may be used (eg for rural/remote areas).					
Bus	Pass ☐	Fail ☐	Taxi/Car	Pass ☐	Fail ☐
Busway station/interchange or train station	Pass ☐	Fail ☐	Ferry	Pass ☐	Fail ☐
Travelator	Pass ☐	Fail ☐	Escalator	Pass ☐	Fail ☐
Train/Tram	Pass ☐	Fail ☐	Lift	Pass ☐	Fail ☐
Café/Shopping Centre	Pass ☐	Fail ☐	Private Vehicle* (Rural/remote areas)	Pass ☐	Fail ☐
3.5. The dog correctly sits in a designated area of chosen transport option, does not try and sit on the seat, and dog enters and exits on command only. The handler is to be in control at all times.				Pass ☐	Fail ☐
3.6. The dog maintains a 'sit' or 'down' position if a person approaches eg sits near a table with a child.				Pass ☐	Fail ☐
Notes					

4. People Response

The dog is passed from front and rear and is non-reactive (eg does not shy away, growl, raise hackles) in any of the following categories:

4.1. Crowd and pedestrian traffic	Pass ☐	Fail ☐
4.2. Member of public	Pass ☐	Fail ☐
4.3. Approached by adult and child	Pass ☐	Fail ☐
4.4. Does not solicit attention	Pass ☐	Fail ☐

Notes:

5. Dog Distraction

5.1. Dog remains calm (slight anxiety is acceptable if less than 3 seconds).	Pass ☐	Fail ☐
5.2. Minimal interaction	Pass ☐	Fail ☐
5.3. Handler has control and dog is responsive to commands.	Pass ☐	Fail ☐
5.4. The dog remains controlled while another dog passes.	Pass ☐	Fail ☐

Notes:

6. Noise Distraction

The dog is to be subject to noise distractions eg loud places/vehicles/person's voice or whistle or dropping a folder.

6.1. Dog remains calm (slight anxiety or fear is acceptable if less than 3 secs).	Pass ☐	Fail ☐
6.2. Dog returns to assist Handler in a reasonable period of time.	Pass ☐	Fail ☐

Notes:

Overall Social Behaviour

Pass ☐ Fail ☐

Notes: Specific comments required regarding how the Handler corrects the dog, reassures the dog, control of leash/harness, and any undue overcorrection. Include observations about temperament and behaviour

Obedience And Respect		
7. Walk to Heel		
7.1. The dog is on the lead throughout the test and walks to heel on left or right of Handler, there is to be no straining or pulling on the lead and no soliciting public attention.	Pass ☐	Fail ☐
7.2. A two (2) metre recall on lead, dog to come directly back to Handler on command.	Pass ☐	Fail ☐
7.3. The dog is to be on the lead/harness at all times and if resting, eg at a café, or public passenger vehicle, or at work, the dog is to be close by to the Handler. The dog is not to wander away.	Pass ☐	Fail ☐
Notes:		
Overall Obedience and Respect	Pass ☐	Fail ☐
Notes: Include specific comments about the Handler management of obedience and respect of the dog and the temperament of the dog.		
Physical Health and Appearance		
8. Toileting/Hygiene Behaviour		
8.1. The dog presents as clean, well-groomed and healthy.	Pass ☐	Fail ☐
8.2. The dog is capable of displaying appropriate behaviour.	Pass ☐	Fail ☐
Notes:		
9. Acceptable Toileting Routine		
9.1. The dog does not attempt to 'mark' over the top of other dogs' scents.	Pass ☐	Fail ☐
9.2. The Handler demonstrates knowledge of toileting routine.	Pass ☐	Fail ☐
9.3. The dog responds to the 'toilet on command' request, which may include taking the dog to a discreet location for toileting purposes.	Pass ☐	Fail ☐
Notes:		

Overall Physical Health and Appearance	Pass ☐	Fail ☐
Notes: Include specific comments about the Handler's management of physical health and appearance of the dog		
Assessment Results		
Observations made: Include specific comments about temperament of dog and also the role played by the Handler to physically control the dog.		
Identified concerns		

PAT assessment result - Overview	Pass ☐	Fail ☐
Notes:		

Declaration	
Signature of Assessor	
Name of Assessor	
Signature Date	



Part F: Handler Declaration

(to be completed by Handler)

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING	Tick
1. I certify that to the best of my knowledge the information in this application is accurate.	☐
2. I have a disability and require my dog to alleviate the effects of my disability.	☐
3. I acknowledge that further information may be requested by the Board to enable assessment of this application.	☐
4. I understand the Board may place conditions on the accreditation of my assistance dog.	☐
5. I must advise the Board within one (1) working day if my assistance dog breaches any provision of the <i>Dog and Cat Management Act 1995</i> (e.g. wandering at large, attacking, chasing).	☐
6. I will carry my Handler identification card when accessing public places with my assistance dog and will produce the card when requested as evidence of my dog's accreditation.	☐
7. I understand that to retain accreditation, my dog and I will undertake and pass the Board's Public Access Test every three (3) years, or as otherwise required as part of the approval, at my expense, to confirm we still meet the standards required for public access rights.	☐
8. I acknowledge that my dog's accreditation as an assistance dog may be revoked as set out in the Board's Accreditation of Assistance Dogs Policy	☐

Declaration	
Signature of Handler	
Name of Handler	
Signature Date	