

**Maryland Veterans Service Animal Program
Nonprofit Training Entity Application Form**

Nonprofit Training Entities who wish to participate in the Maryland Veterans Service Animal Program are asked to complete the following application. In addition to the application, please attach all required documentation as noted below.

Organization Name: _____

Street Address: _____

City: _____

Zip Code: _____

Point of Contact: _____

Title: _____

Phone: _____ Email: _____

The following criteria must be met to participate in the Maryland Veterans Service Animal Program. By initialing below you are certifying that your organization meets the eligibility criteria.

	Initials
This nonprofit training entity is a 501(c)(3) IRS Exempt Organization	_____
This nonprofit training entity is Maryland based	_____
This nonprofit training entity engages in the training of veteran service or support dogs	_____
This nonprofit training entity engages in providing equine therapy to veterans	_____

Have there been any legal actions taken against your organization or its principles during the last three to five years? (If yes, please explain. Use additional paper if necessary) Yes or No

- Please attach the following to your application:***
- Affirmation letter confirming tax exempt status***
 - For equine therapy programs: verification of credentials (PATH Premier Center accreditation or Eagala certification)***
 - Most recent financial statement***
 - 2 References supporting your application***

Signature ***Date***

Please return completed application to:

Mail: Maryland Department of Veterans Affairs
16 Francis Street, Fourth Floor
Annapolis, Maryland 21401
ATTN: Outreach and Advocacy Program

Email: dana.burl@maryland.gov