

Emotional Support/Psychiatric Service Animal Authorization Form

General Information:

Pursuant to the Department of Transportation (DOT) guidance for the carriage of service animals and 14 CFR Section 382.27 and 382.117, American Airlines requires a passenger with a qualified disability seeking to travel with an emotional support or psychiatric service animal to provide, prior to 48 hours of travel, documentation from a licensed mental health professional (e.g. psychiatrist, psychologist, licensed clinical social worker, including a medical doctor specifically treating the passenger's mental or emotional disability) addressing the passenger's disability status and need to travel with an emotional support or psychiatric service animal. This form may be used for that purpose.

- This form is valid for one year from the date the mental health professional has signed the form.
- Other documentation may be required for travel entering or exiting an international location.
- Small animals may remain in the passengers lap during the flight. If a carrier will be used, it must meet the USDA guidelines and fit under the aircraft seat.

Instructions for Mental Health Professional or Medical Doctor

Please complete the form below. Alternatively, please provide the passenger with a written statement containing the information below on your practice letterhead.

Must be completed by Mental Health Professional or Medical Doctor	
I am currently treating recognized in the Diagnostic and Statistical Manual of Me(type of animal) to travel as an emotional s	ntal Disorders (DSM IV). The passenger needs
travel and/or for activity at his or her destination. My state or jurisdiction of in in	
Signature:	Date://
Instructions for Passenger: Fax a copy of the completed form or written statement to the American Airlines Special Assistance Coordinators desk to 817-967-4715 or email to Sacdesk.sro@aa.com at least 48 hours prior to your travel date. Please keep the original form or your written professional statement in your possession while traveling and be prepared to present it to an airline representative if requested to do so.	
I understand and agree with the above information.	
// (Passenger's Signature) Date of Travel Flight N	umber Telephone Contact