

REASONABLE ACCOMMODATION REQUEST FORM

Please check applicable status: Employee Intern Volunteer

A. Questions to clarify accommodation requested.

What specific accommodation are you requesting?

If you are not sure what accommodation is needed, do you have any suggestions about what options we can explore? Yes No

If yes, please explain.

Is your accommodation request time sensitive? Yes No

If yes, please explain.

B. Reasons for accommodation request.

What, if any, job function are you having difficulty performing?

What, if any, employment benefit are you having difficulty accessing?

What functional limitation is interfering with your ability to perform your job or access an employment benefit? (Do not provide disability or diagnosis. Only describe the limitation(s)).

Have you had any accommodations in the past for this same limitation? Yes No

If yes, what were they and how effective were they?

If you are requesting a specific accommodation, how will that accommodation assist you?

C. Other.

Please provide any additional information that might be useful in processing your accommodation request:

Signature

Date

- Return this form to the Associate Vice President of Human Resources and Training.
- A meeting will be scheduled between you and an HR representative to engage in an interactive process to discuss and determine possible accommodations.