

Name:

2022-2023

REQUEST FOR REASONABLE ACCOMODATION FOR DISABILITY

Applicant Information

Applicant Name:

Date:

Disability (Please describe the nature, the extent, and duration of your disability):

Accommodation Request

Provide a description of the accommodation you are requesting. Please identify a specific accommodation or suggestion if possible:

Provide the reason you need an accommodation (For example, what is the issue you are having difficulty performing in the application process due to disability):

Describe what limitation, if any, is interfering with your ability to complete the application process:

Describe how the accommodation requested will help you complete the application process:

Provide any additional information you think may be relevant to this request: