

## **Request for Reasonable Accommodation Form**

The University of Denver fully complies with the reasonable accommodation requirements of the Rehabilitation Act of 1973. Under the law, agencies must provide reasonable accommodation to qualified employees or applicants with disabilities, unless to do so would cause undue hardship.

The University is committed to providing reasonable accommodations to its employees and applicants for employment in order to assure that individuals with disabilities enjoy full access to equal employment opportunity at the University.

The University provides reasonable accommodations:

- when an applicant with a disability needs an accommodation in order to be considered for a job;
- when an employee with a disability needs an accommodation to enable him or her to perform the essential functions of the job or to gain access to the workplace; and
- when an employee with a disability needs an accommodation to enjoy equal benefits and privileges of employment.

**Date:**

**Name:**

**Contact Number:**

**DU ID #:**

**Job Title:**

**Department:**

**Physical Work Location:**

**Supervisor:**

**Supervisory Contact Number:**

**Please describe your medical condition/physical disability:**

**How does the Disability Affect Your Major Life Activity/ies:**

**Accommodation Requested** *(Describe the specific accommodation or modification that you are requesting):*

**By signing this form, I certify that I have answered the questions above fully and honestly. I also authorize the release of information to the University of Denver for the purpose of determining the availability of reasonable workplace accommodations. I further authorize the university to seek clarification of this documentation if necessary by contacting my physician or care provider.**

**Signature:**

**\*NOTE: If your need for an accommodation is not evident, you will be required to provide documentation from an appropriate qualified healthcare professional, concerning your disability and functional limitations as they pertain to the requirements of your current position or the one for which you are applying.**

**Your request will be processed and evaluated by qualified personnel, who will work with you, to discuss the most appropriate reasonable accommodation for your claimed disability. However, this assistance does not necessarily signify a determination by the University that you are a qualified individual with a disability under the Americans with Disabilities Act or the Rehabilitation Act, until such time as you have been formally approved. At which time, you will receive a letter stating that approval of your accommodation has been determined.**

**You will be contacted at the email address or telephone number you provided. Any documentation you submit will become part of your record of request for an accommodation, whether you are an employee or an applicant for employment with the University. Your identity and information pertinent to your request for accommodation may be revealed to university officials who have a need to know.**

**Your failure to provide this information may result in the inability of the ADA Coordinator to grant your request. Requests may be e-mailed to the ADA Coordinator at [ADA.Coordinator@du.edu](mailto:ADA.Coordinator@du.edu) or faxed to 303-871-5941, or mailed/ hand-delivered to the attention of: ADA Coordinator, University of Denver, Office of Equal Opportunity & Title IX, Driscoll Commons, Suite 30, 2050 E Evans Ave., Denver, CO., 80208. Should you need to contact us by phone, please call 303-871-3941.**

