



Request for Reasonable Accommodations Form

Updated February 2022

Your request for a reasonable accommodation, and information submitted in support of or related to the request, will be kept confidential, except that it will be shared with those University officials who are involved in evaluating and/or implementing the request.

Any questions regarding the reasonable accommodation policy or process should be directed to Elizabeth M. Garcia, Executive Director for the Office of Equity and Diversity, Institute of Molecular Biology and Medicine, Suite 315, (570) 941-6645, [elizabeth.garcia2@scranton.edu](mailto:elizabeth.garcia2@scranton.edu).

Please review the policy at <https://www.scranton.edu/equity-diversity/docs/ada-accom-policy.pdf>

**To be Completed by Employee/Applicant:**.

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_R#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor’s ph.#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Please describe the condition(s) for which you are requesting an accommodation:
2. Please describe any limitation resulting from your condition(s) that interfere with your ability to perform the essential functions of your position with the University:
3. Please describe the accommodations that you believe are needed to enable you to perform the essential functions of your position:

I understand that the specific accommodations requested may not be granted, but that the University will attempt to provide reasonable accommodation that does not create and undue hardship on the University.

**Signature: Date:**

**Date Received by OED:**