REQUEST FOR REASONABLE ACCOMMODATION

Information on Requester

Name

Occupational series, Grade

Branch/Team

Today’s Date

Date of Request

Check One

Application Process

Access A Benefit or Privilege (attend training program or social event)

Personal Assistance Services

Accommodation Requested: (Be as specific as possible, e.g., adaptive equipment, reader, interpreter, architectural barrier, etc.)

Reason for Request: (If accommodation is time sensitive, please explain)

If accommodation is time sensitive, please explain:

Send completed form to Human Resources Officer, Office of Navajo and Hopi Indian Relocation, P.O. Box KK, Flagstaff, AZ 86002; Fax (928) 774-1977 or Email to tslater@onhir.gov.

DECISION ON REASONABLE ACCOMMODATION REQUEST

Request approved __________ Accommodation will begin on _________________

Date Date

Executive Director (Signature) __________________________ Date _______________