

REQUEST FOR REASONABLE ACCOMMODATION



To request a reasonable accommodation, complete this form and present it to the City's ADA Designee. Contact information for ADA Designee can be obtained by contacting the Human Resources at 240-542-2023.

Requesting Party's Name:	Job Title/ Position Applied:	
Daytime Phone Number:	Request Date:	Address:
Email Address:		
Please Check One: <input type="checkbox"/> Employee <input type="checkbox"/> Applicant		
If Employee, Supervisor's Name and Phone Number:		
State the functional limitations that you experience as a result of your health condition: <i><u>Note: SPECIFIC DISABILITY NEED NOT BE DISCLOSED</u></i>		
My limitation(s) prevents me from performing the following program or work related activities:		
I am requesting acomodation because: <input type="checkbox"/> I am applyingfor employment and the accomodation will allow me to participate in the application/ selection process. <input type="checkbox"/> I am currently employed by the City of Greenbelt and require an accomodation in my current position. <input type="checkbox"/> I am a person seeking an accomodation so that I may participate in a City program, service or activity for which I am otherwise qualified.		

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The accommodation I am requesting is:
(Describe the type of accommodation suggestions for work site , exam or programs site modification or specific job duties that may be restructured to facilitate your employment or participation, and the details of how or where the accommodation (if purchasable) may be obtained, including the cost, if known).

This accommodation will allow me to perform the function of my job or participate in the application/ selection process or program as follows:
(Describe how the accommodation will assist you)



I UNDERSTAND THAT I MAY BE REQUIRED TO PROVIDE MEDICAL INFORMATION FROM MY HEALTH CARE PROVIDER AS PART OF THIS PROCESS.

SIGNATURE

DATE

PRINT NAME

Please forward to:

Dawane Martinez
Director of Human Resources | City of Greenbelt ADA Coordinator
Department of Human Resources
25 Crescent Road
Greenbelt, MD 20770
Office: (240) 542-2023
Email: dmartinez@greenebltmd.gov