

Americans With Disabilities Act (ADA) Accommodations Request Form

This form is being utilized in accordance with the Americans With Disabilities Act, 1990, in an effort to ensure that every person receives fair treatment and opportunities from the Mesquite Independent School District. Any adversity, with regard to ADA, should be made known on this form and submitted to the ADA Coordinator, James E. Huckaby. The ADA Coordinator will review the details of the request and forward the form to the appropriate person/department for further processing.

SECTION A:

****PLEASE BE AS DETAILED AS POSSIBLE****

1. Nature of the Problem: (WHEN and WHERE did this problem occur?)

2. Suggested / Requested Action / Accommodation:

Requestor's Name:

Position / Title:

Facility in Question:

Facility Address:

City, State, Zip:

Phone Number:

Date of Request:

PLEASE SKIP to SECTION C on PAGE 2

SECTION B: **ADA COORDINATOR USE ONLY******

Has the above-mentioned problem been investigated since your being made aware of it?

Yes _____ No _____

Would compliance with this suggestion/request result in an undue hardship for the Mesquite Independent School District?

Yes _____ No _____

PRIORITY? (Determined by the ADA Coordinator)

NORMAL _____ **HIGH** _____

Details of Your Approval or Denial:

Suggested Course of Action:

SECTION C: APPROVAL SIGNATURES:

Principal / Department Head

Date

Scott Owens, Executive Director - Facilities Mgmt

Date

James E. Huckaby, ADA Coordinator

Date

Kathryn Bohling, Assistant Superintendent - Business Services

Date

Return completed form via inter-district mail or by FAX to:

**James E. Huckaby
ADA Coordinator
L.A. Berry Support Complex
FAX: 972-882-5565**