

EFFECTIVE COMMUNICATION REQUEST FORM*

Please note: The district needs as much advanced notice as possible to ensure that reasonable accommodations are met. Reasonable efforts will be made to accommodate requests made less than 48 hours in advance of a scheduled program, activity or event. If aids or services are needed for a meeting of the school board, please contact the office of the superintendent directly at: (360) 676-6501.

Date of request: _____

Request Type: *(Please check all that apply)*

- ☐ Assistive Listening Aid or Service
- ☐ Assistive Vision Aid or Service
- ☐ Assistive Speech Aid or Service
- ☐ Other _____

Individual making request (first and last name): _____

Email, phone or website (preferred communication): _____

Event Details: *Please attach any relevant supporting information (i.e., event flyer or brochure).*

Event Name:	
Event Date:	
Start and End Time:	
Event Description (i.e., lecture, seminar, meeting, sports event):	
Location (i.e., building, facility, off-campus school-sponsored activity):	
Other relevant details:	
Building manager (Principal) where event will take place:	
Event contact person:	

Please return this completed form to: Keith Schacht, District Office, 1306 Dupont St., 360-676-6400, keith.schacht@bellingshamschools.org

* This document is available in an alternative format upon request.

Adoption Date: July 6, 2016