

Employee Request for Reasonable Accommodations under the Americans with Disabilities Act Amendments Act

Please complete the following information and return it to the Office of Human Resource Services.

1. Employee name: _____
2. Work extension: _____ Best telephone number after hours: _____
3. Position: _____
4. Campus or Department: _____
5. Supervisor name: _____
6. Nature of the qualifying disability: _____

7. Please list the limitations that interfere with your job responsibilities: _____

8. Please describe the accommodations you believe are needed to enable you to perform the essential functions of this job. _____

9. Medical provider and contact information: _____

Employee Signature: _____ Date: _____

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. 'Genetic information,' as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.