



University of New Hampshire

REQUEST FOR REASONABLE ACCOMMODATION

Your Name _____		
_____	_____	<u>PAT</u> <u>OS</u> <u>FAC</u>
Today's Date	Your Job Title or NA	Your Status (check one)

Your Department and Work Number or NA		

Your Supervisor/ Dept. Chair's Name or NA		

_____	_____	
Your Preferred Telephone Contact	Your Preferred Email Contact	

Your Preferred Mailing Address		

Medical Information

Please identify the physical or mental condition for which you are requesting accommodation:

Are one or more major life activities affected by the condition? Yes No

If yes, please select from this list or add others:

Breathing	Sitting
Caring for Oneself	Sleeping
Concentrating	Speaking
Controlling Bowels	Standing
Eating	Thinking
Hearing	Walking
Interacting with Others	Bending
Learning	Working
Seeing	Other:

How long is the condition expected to last?

Please provide the name and contact information for the healthcare professional(s) who is treating you for this condition. If you have a condition that is not readily apparent it will be necessary to contact your provider.

REASON FOR REQUEST

Please describe how the condition affects your ability to perform the essential functions of your job:

What accommodations are you requesting that will assist you in performing the essential functions of your job?
Please be as specific as possible.

Please describe any accommodations or assistive technologies you currently use:

Add any comments that you feel may be helpful in consideration of your request:

Once your form has been filled out, save as a PDF and include your first and last name in the title and a description of the form(s) you are submitting. You can attach more than one document to the email. For example: LASTNAME_FIRSTNAME – Healthcare Provider Release

When you are ready to submit your documents, [click here](#). Attach your document(s) to the UNH Box email address populated in your selected email application and click Send. Your attachments will be sent directly to a secure UNH folder in Box. *Please note that only the attachments will be saved in the Submission Inbox and any message written in the body of the email will not be received.* You will receive a confirmation email receipt delivered to the email address you submitted your forms from.

This form is available in alternate format upon request.