WASHINGTON COLLEGE ADA/504 EMPLOYEE FACT SHEET AND ACCOMMODATIONS REQUEST FORM

Washington College, whose mission is to provide educational opportunities, fully supports and seeks to comply fully with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA) of 1990. The College strives to create a welcoming environment for all and will work in good faith to meet the needs of persons with special needs. The College endeavors to provide opportunities for success, with as few deterrents as possible to students, employees, and visitors.

The following procedures are in place to assist employees with needs for accommodation: If assistance is desired, employees are encouraged to contact Andrea Vassar, Director of Disability Services and the Office of Academic Skills/Section 504/ADA Coordinator for employees (Miller Library, Extension 7883), to discuss any accommodation needs. Completing and submitting the form below to the ADA/504 Coordinator begins the accommodations request process, and allows the Coordinator to make requests on the employee's behalf. Disclosure of disability is voluntary.

Employee Name:

Employee ID

Campus Location:	Extension
Position	Supervisor
Documentation of disability may be required. If so, at the employee's personnel record.	such documentation will be maintained in a confidential file separate from
Ouestions to clarify accommodation reason and requ	uest: Please use a separate sheet for your responses and attach it to this form
1. What specific accommodation are you requ	esting?
2. If you are not sure what accommodation is n	needed, do you have any suggestions about what options we can explore?
3. Is your accommodation request time sensitiv	ve?
4. What, if any, job function are you having di	fficulty performing?
5. What, if any, employment benefit are you ha	aving difficulty accessing?
6. What limitation is interfering with your abil	lity to perform your job or access an employment benefit?
7. Have you had any accommodations in the pa	ast for this same limitation? If so, please explain.
8. If you are requesting a specific accommodat	tion, how will that accommodation assist you?
Please provide any additional information that r	night be useful in processing your accommodation request.
Employee Name	

Washington College does not discriminate on the basis of race, sex, color, national or ethnic origin, age, religion, marital status, handicap or disability, or sexual orientation in the administration of any of its educational programs and activities or with respect to admission and employment.

Please send this form and any attachments to: Andrea Vassar, Director of Disability Services and the Office of Academic

Skills/Section 504/ADA Coordinator, Office of Academic Skills, Miller Library.