



COLLEGE OF AGRICULTURE AND NATURAL RESOURCES  
Office of Human Resources Management & Compliance Programs

## PROGRAM PARTICIPANT REQUEST FOR REASONABLE ACCOMMODATION/FREE LANGUAGE SERVICES

Participant/Beneficiary Name: **First & Last Name**

Phone Number: **Phone Number**

Program/Activity: **Program/ Activity Participating**

County/City:

Facility:

Address: **Street address, city, state, zip code**

Email: **Email Address**

Date of Request: **Click here to enter date.**

### Accommodation Details:

1. What type of accommodation are you requesting?

**Please be as specific as possible (i.e. interpretation or translation services).**

2. What is the reason for the accommodation request?

**Please be as specific as possible (i.e. medical disability or impairment).**

3. Request Sent To:

**Please be as specific as possible (i.e. email, fax, verbally expressed to).**

**Click here to enter date.**

\_\_\_\_\_  
Signature

### Internal Review (To be completed by Responsible Official)

Program/Activity Responsible Official: **First & Last Name**

Title: **Enter Official Title**

Date Request Received: **Click here to enter date.**

#### ☐ **APPROVED**

1. Date of Approval: **Click here to enter date.**

2. Type of Accommodation Provided: **Accommodation Provided**

3. Cost Associated: **Enter Cost of Accommodation**

#### ☐ **REFERRED FOR DENIAL CONSIDERATION**

1. Date Referred: **Click here to enter date.**

2. Referred To: **Dean or Designated HRMCP Official**

3. Reason for Denial Consideration: **Please specify reason for denial consideration.**

Receipt of Referred Accommodation Request: **Click here to enter date.**

#### ☐ **APPROVED**

#### ☐ **DENIED**

Justification for Denial: **Enter Justification**

\_\_\_\_\_  
Compliance Officer

\_\_\_\_\_  
Signature

**Click here to enter date.**

*University programs, activities, and facilities are available to all without regard to race, color, sex, gender identity or expression, sexual orientation, marital status, age, national origin, political affiliation, physical or mental disability, religion, protected veteran status, genetic information, personal appearance, or any other legally protected class.*