Request for Accommodation for Arizona FFA Competitive Events and Programs

Deadline: Must be submitted twenty one days prior to event in question

Member Information

The following information is required if there is a qualified member that plans to participate in an Arizona FFA competitive event or program and wishes to request an accommodation.

Please complete the following information, print the completed form and secure necessary signatures. Please upload the signed form to Arizona FFA at https://bit.ly/AZFFAAccForm 21 days prior to the event. **Electronic signatures cannot be accepted.**

This information will be kept strictly confidential and will be used only to process services for participants needing special needs assistance.

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Member Name:	
Mombor/Parent or Guardian phone number:	
Home Address:	
Advisor's Name:	Advisor's Phone Number:
Advisor's Email Address:	Advisors i florie Natificer.
Chanter Name	
Chapter Address:	
Select All Area(s) that apply:	
□ Agriscience Fair	
□ CDE	
Name of Specific Event or Award Area:	
Description of Disability and Accommodations Specific Disability or Need:	Requested
Please describe the limiting nature of the disability	and the accommodations requested:
Please list accommodation or accommodations pro	ovided at local level selection activity:
Student Signature/Date	Advisor Signature/Date
Parent Signature/Date	Authorized State Staff/Date