Employee/Applicant Request for ADA Reasonable Accommodation Form
Fond du Lac Tribal and Community College

Fond du Lac Tribal and Community College is committed to complying with the Americans with Disabilities Act (ADA) and the Minnesota Human Rights Act (MHRA). To be eligible for an ADA accommodation, you must be 1) qualified to perform the essential functions of your position, and 2) have a disability that substantially or materially limits a major life activity or function. The ADA Coordinator will review each request on an individualized case-by-case basis to determine whether or not an accommodation can be made.

Employee Name	Job Title

Work Location	Phone Number

Data Privacy Statement: This information may be used by your agency human resources representative, ADA coordinator, or any other individual who is authorized by the agency to receive medical information for purposes of providing reasonable accommodations under the ADA and MHRA. This information is necessary to determine whether you have a disability as defined by the ADA or MHRA, and to determine whether any reasonable accommodation can be made. The provision of this information is strictly voluntary; however, if you refuse to provide it, the agency may not have sufficient information to provide a reasonable accommodation.

DO NOT PROVIDE ANY INFORMATION THAT IS NOT RELATED TO YOUR REQUEST FOR REASONABLE ACCOMMODATION. DO NOT PROVIDE COPIES OF MEDICAL RECORDS.

Questions to clarify accommodation requested.

1. What specific accommodation are you requesting?

2. If you are not sure what accommodation is needed, do you have any suggestions about what options we can explore? If yes, please explain.

Questions to document the reason for the accommodation request *(attach additional pages if needed).*

1. If you are an employee, what, if any, job function are you having difficulty performing; or if you are an applicant, what portion of the application process are you having difficulty participating in?

2. What, if any, employment benefits are you having difficulty accessing?

3. What limitation, as result of your physical or mental impairment, is interfering with your ability to perform the functions of your job, access an employment benefit, or participate in the application process?

4. If you are requesting a specific accommodation, how will that accommodation be effective in allowing you to perform the functions of your job, access an employment benefit, or participate in the application process?

Information Pertaining to Medical Documentation:

In the context of assessing an accommodation request, medical documentation may be needed to determine if the employee/applicant has a disability covered by the ADA and to assist in identifying an effective accommodation. The ADA Coordinator at Fond du Lac Tribal and Community College is tasked with collecting necessary medical documentation. In the event that medical documentation is needed, the employee/applicant will be provided with the appropriate forms to submit to their medical provider. The employee/applicant has the responsibility to ensure that the requested information is returned to the ADA Coordinator in a timely manner.

This form does not cover, and the information to be disclosed should not contain, genetic information. "Genetic Information" includes: Information about an individual's genetic tests; information about genetic tests of an individual's family members; information about the manifestation of a disease or disorder in an individual's family members (family medical history); an individual's request for, or receipt of, genetic services, or the participation in clinical research that includes genetic services by the individual or a family member of the individual; and genetic information of a fetus carried by an individual or by a pregnant woman who is a family member of the individual and the genetic information of any embryo legally held by the individual or family member using an assisted reproductive technology.

Employee/Applicant Signature   Date