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| **A. Questions to clarify accommodation requested.** |
| What specific accommodation are you requesting?      |
| If you are not sure what accommodation is needed, do you have any suggestions about what options we can explore?  | Yes [ ]  | No [ ]  |
| If *yes*, please explain.      |
| Is your accommodation request time sensitive?  | Yes [ ]  | No [ ]  |
| If *yes*, please explain.      |
| **B. Questions to document the reason for accommodation request.** |
| What, if any, function are you having difficulty performing?      |
| What, if any, benefit are you having difficulty accessing?      |
| What limitation is interfering with your ability to engage with the MAO program?      |
| Have you had any accommodations in the past for this same limitation?  | Yes [ ]  | No [ ]  |
| If *yes*, what were they and how effective were they?      |
| If you are requesting a specific accommodation, how will that accommodation assist you?       |
| **C. Other.** |
| Please provide any additional information that might be useful in processing your accommodation request: (this section may also be used as a continuation for Parts A & B)      Signature       Date     Return this form to danya@abilityts.com  |