

REASONABLE ACCOMMODATION INFORMATION TRACKING

To be completed by Personnel Specialist (for applicant), Decision-maker or his/her designee (for employees).

1. Employee/Applicant Data *(Check one)*

Applicant Requestor Employee Requestor

Today's Date

2. Requestor Information

a. Name	b. Center/Office/Division
c. Position Title, Series and Grade	

3. Date Accommodation Requested

4. Management Official Receiving Request

5. Date Request Referred to Decision-maker

6. Name and Title of Decision-maker

7. Nature of Accommodation Requested

8. Disposition of Accommodation Request

Approved as requested Date: _____ Alternative accommodation/ rejected Date: _____

Alternative accommodation/ accepted Date: _____ Accommodation denied Date: _____

Other *(please explain under #14, comments)* Date: _____

9. Nature of Accommodation Provided *(If applicable)*

Date Accommodation Provided *(If applicable)*

10. Reason Request Was Denied *(If applicable) (Attach copy of completed denial form.)*

Attach copies of all documents obtained or developed in processing this request.

11. Sources of Technical Assistance *(If applicable)*

12. Accommodation Provided for

- Performing job functions
- Accessing work environment
- Accessing Benefit or Privilege of Employment

13. Was medical information required to process this request? *(If yes, explain issues.)*

14. Comments